### TWELFTH

### ANNUAL REPORT OF THE TRUSTEES

OF THE

### STATE LUNATIC HOSPITAL

AT WORCESTER.

DECEMBER, 1844.

Boston:

DUTTON AND WENTWORTH, STATE PRINTERS.

1844.

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### TWELFTH ANNUAL REPORT

OF THE

### TRUSTEES OF THE STATE LUNATIC HOSPITAL.

DECEMBER, 1844.

To His Excellency George N. Briggs, Governor of the Commonwealth of Massachusetts, and to the Honorable Council:

The State Lunatic Hospital having nearly completed the twelfth year of its successful operation, the Trustees respectfully present this, their Twelfth Annual

### REPORT:

The Hospital, during the past year, has been more crowded with patients, and its operations generally have been more successful and beneficial, than in any former year. The smallest number of patients at any time during the year has been two hundred and fifty-three. The largest number two hundred and seventy-three. The average number has been two hundred and sixty-one. The number of attendants, including the Superintendent and his family, the Chaplain, Steward, &c., is about fifty-five, making upwards of three hundred persons as the average number under the same roof.

By resolves of March 24th, 1843, the Trustees, Superintendent and Treasurer "were authorized so to enlarge the Hospital as to accommodate one hundred and fifty more patients, together with all the necessary furniture and other accommodations for the same. Under these resolves the Trustees, as stated in our last report, together with the other gentlemen, erected, just at the close of the last year, the Johonnot Hall, consisting chiefly of two large rooms, and extending from the rear of the centre building to the chapel. These large rooms were much needed, as all our other rooms are small. Experience, since

our last report, has fully proved their usefulness. They also, at the same time, commenced upon the foundation of two extensive wings, one for males, the other for females, sufficiently large to contain the required number of patients; but fearing that possibly the funds appropriated might be insufficient, they contracted at first for finishing only, and furnishing the two upper stories. All the rooms in the two upper stories of the new wings are now nearly finished and partly furnished.

The condition of our institution will more particularly appear by the Report of the Superintendent, which is herewith submitted. Under the smiles of Providence this Hospital has increased in size, usefulness and reputation, beyond the anticipations of its most sanguine friends. For its success we are largely indebted to the energy, ability and untiring exertions of Doct. Samuel B. Woodward, who has been the Superintendent from its beginning, and who has himself built it up and made it what it now is. He has already spent a large portion of his useful life in the care of this and other public institutions; and we regret that we have to state that during the last spring and summer the Trustees thought his health so precarious, and so much impaired by confinement and close application to duties beyond what he had strength to perform, that they enjoined it upon him to break off at once from his duties here, and take a journey to the south for the benefit of his own health. was absent two months, returned somewhat improved, and as we trust derived some information that may prove beneficial to all.

During the sickness and absence of Doct. Woodward, Doct. John R. Lee, the Assistant Physician, had the whole medical care of the patients, and shew that by his skill and experience he was entitled to the confidence of all. We feel grateful that the life, health and usefulness of our Superintendent has been so long continued to us; but the time must come when age or infirmity will require a release from some portions of his present arduous duties.

We think it necessary, even in the present condition of the Hospital, that there should be some additional officers. We are liable, as we have experienced the past autumn, to fevers and other sickness and disability among our attendants. If we have more officers we must have more accommodations for them. Nearly one half of the centre building is now taken up for dining rooms for the patients, being six of the largest rooms. The rest of this part of the Hospital is filled by the Superintendent and his family, the Steward and Matron, and other principal officers of the Institution, and is already more crowded than any other part of the building. This too is the only comfortable and con-

venient part of the Hospital for the superior officers. The Trustees have found it necessary, even for the present number of officers, to make them some further accommodations.

In the infancy of our institution we had no chapel, and of course no chaplain, and no room in the building was reserved for his exclusive use. Ever since the erection of the chapel we have had a regular attendance upon public worship on the Sabbath; and ever since the completion of the Johonnot Hall there has been a regular attendance of such as were sufficiently convalescent and quiet, upon daily prayers in that building. Upon these occasions the Rev. George Allen, the Chaplain, officiates with much credit to himself, and we trust affording much comfort and consolation to the afflicted, and much instruction and benefit to all his hearers.

For the details of our financial operations the year past, we refer to the Report of the Treasurer. If there has been economy in the use or expenditure of the funds appropriated for the support, enlargement or improvement of our institution, we are much indebted to the prompt collections, punctual payments, and safe investment made by the Treasurer.

Of the Steward and Matron we can speak in terms of the highest commendation, for their careful and economical use of the public property, and kind treatment of the patients. The attendants and assistants all deserve praise. If there be a point of view in which this institution shows itself to the most advantage, it is in the discipline and subordination of all the officers and persons employed therein,—each one knowing his place, and each one doing his appropriate duty.

By a resolve of March 13th, 1844, two thousand dollars were appropriated for the erection of a Laundry. The Trustees have selected a spot a little without the yard, and at some little distance from the other buildings, for a Laundry, where all the clothes may be washed, dried, ironed, mangled and aired. This building is now nearly finished. It is of brick, two stories high, fifty feet long and thirty-eight feet wide. It has been the study of the Trustees so to locate all the buildings, especially the workshops where fire is used, as not to expose unnecessarily the principal buildings to the ravages of fire. The place in the main building heretofore used for ironing clothes was contracted, inconvenient and unsafe for that purpose; it will not afford comfortable accommodations as a lodging-room even for any of the attendants; but the building lately used as a wash-room, and which the Trustees had intended for a bakery, they found upon examination unfit for that pur-

pose; it was of wood, and somewhat decayed. They had it removed without the yard, where it may be used as a store-room. They have also found it necessary and expedient to erect upon the same ground a substantial brick building for a bake-house,—the chambers over which will afford comfortable rooms for some of the attendants, thereby vacating some of the chambers in the centre building, so as to give better accommodations for the Chaplain and others. This situation for a bakery is convenient, the necessity great, and the cost we trust not very considerable.

During the year the meetings of the Trustees have been regularly attended, and the monthly visits to the Hospital regularly made. The by-laws have been revised, and made to conform to the present condition of the Hospital. The Aqueduct, with iron pipes, as authorized by a resolve of March 13th, 1844, has been laid down; but as the damages to be agreed upon or assessed for land occupied thereby, have not yet been settled, the whole cost cannot be here stated.

The resources for the payment of ordinary expenses are the board of patients, the produce of the farm, and the proceeds of our mechanical operations. The current expenses for ordinary purposes, the past year, and the receipts for the payment thereof, can be better understood in the Treasurer's Report.

Much good might result if the Trustees had authority to appropriate, from their funds for current expenses, when they may find it expedient, a sum not exceeding one thousand dollars in any one year, for the purchase of land, or for the erection, enlargement or permanent improvement of their fences and buildings.

There is now a piece of productive land, about five acres, situated between the farm of the Hospital and the public highway, that has been recently sold for about five hundred dollars, and was purchased and is now held by a friend, and offered to our institution at the cost. We think it worth much more to the Hospital than to any other concern. Every year, as the number of our patients increases, we increase the productiveness of our land, the number of cattle upon our farm, and consume a greater amount of produce in our numerous family.

Most of the funds derived from the estates of the late George S. Johonnot, and of Martha Johonnot, his widow, have been converted into cash; particularly those bridge shares and bank shares that were of doubtful value. The times have been favorable for these operations, and the loss on this part of their estates less than was feared. These funds were appropriated, by resolves of 1843, for the enlargement of

the Hospital,-for which purpose about twenty-eight thousand dollars have been already paid, and about fifteen thousand eight hundred dollars, in cash and in good funds, remain to pay for what has been done and for what is to be done to finish the wings agreeably to said resolves, and for furnishing the same. These new wings, one for males and the other for females, are each of them in the form of an L, and extend nearly on a line with the former front of the Hospital, and in the same direction each way one hundred feet, making the building in front two hundred feet longer than before. The centre building is seventy-six feet long. The two old front wings are each one hundred and twentyfour feet long. The new wings extend their front each way one hundred feet, making the whole front five hundred and twenty-four feet. The lateral wings extend backward; the old lateral wings each from front to rear one hundred and thirty-six feet. The new lateral wings extend from the extreme front backward; the new wing for males, from front to rear, one hundred feet. The new lateral wing for females only seventy-five feet, being as long as the Trustees calculated the funds appropriated would complete and furnish. The centre building is four stories high, and the wings are three stories, exclusive of the basement, which contains the kitchens, rooms for attendants, &c., and of the attic. The Johonnot Hall is seventy-six feet long, and the chapel, which is a continuation of the same line of building, is forty feet,both extending from the rear of the centre building one hundred and sixteen feet. On each side of the chapel are infirmaries and other rooms extending each way to the male and female central wings, and forming a hollow square or yard on each side of the Johonnot Hall. The whole, when completed, will afford good accommodations for four hundred patients and their attendants.

The whole number of patients that have been admitted into the Hospital from the beginning is 2013. The whole number that have been discharged, including those that have died, is 1750. There remain now, at the end of the year, 263 patients. The number admitted the past year has been 236. The number discharged 228, of whom 124 have recovered and 15 have died. Leaving at the Hospital 8 more patients at the close of the year than at its commencement.

The produce of the farm has been large, and chiefly consumed upon the premises. Much of the work in the shoe-shop is for the use of the patients. The cabinet furniture, the matresses, and the linen for the new wings, have been prepared by those of the household.

R. Newton, Esq. has been employed by the Trustees as council, and

is now engaged in settling the land damage of the aqueduct. The amount paid for the aqueduct is \$2,210 72. The pipe is of iron; it has a bore of two inches diameter, and is one mile long. Its weight is about one hundred and forty pounds to the rod. Its strength has been tested by a powerful hydraulic press.

Much yet remains to be done to carry out the designs of the benevolent founders of this institution. There is much room for the charitably disposed and affluent to do good. Many improvements remain yet to be made, and many distressed subjects to be relieved.

The State Lunatic Hospital has uniformly received the patronage and encouragement of the wise and good. We feel it to be our duty, in behalf of the afflicted inmates and their friends, to acknowledge the bounty and kindness of our civil rulers, in erecting and supporting so useful an establishment. We would gratefully remember also individual benefactors, among the foremost of whom are the late George S. Johonnot, Esq., and the late Martha Johonnot, his widow, who have bequeathed so large a portion of their estates in aid of the benevolent cause in which we are engaged.

HENRY GARDNER, STEPHEN SALISBURY, JOSEPH SARGENT, S. C. PHILLIPS.

Worcester, Dec. 1st, 1844.

\$3984 19

### TREASURER'S REPORT.

To His Excellency George N. Briggs, Governor, and to the Honorable Executive Council of the Commonwealth of Massachusetts:

The Treasurer of the State Lunatic Hospital respectfully presents his Twelfth Annual Report:

The Treasurer charges himself from December 1, 1843 to November 30, 1844, inclusive, as follows:

ber 50, 16±4, inclusive, as lonows:	
For cash on hand Dec. 1, 1843, balance of	
account,	8 68
For receipts from cities, towns and indi-	
viduals,	37
For credits on bills for sundry articles sold, 284	53
· · · · · · · · · · · · · · · · · · ·	000000000000000000000000000000000000000
	\$32,271 58
He credits himself as follows:	\$32,271 58
	\$32,271 58 3 47
	3 47
For payments for improvements and repairs, 736	3 47 41

66	66	" furniture and bedding, .	1656 33
66	66	" clothing, linen, &c	2447 66
"	66	" fuel and lights,	3984 19
46	66	" provisions and groceries,	10,675 89
44	66	" medical supplies,	526 38
66	66	" hay \$40, straw \$120 20,	160 20
66	"	" miscellaneous,	1220 22

Expenses for the year,	•	29,278 75		
Cash on hand balance to	new account,	2,992 58		
		· · · · · · · · · · · · · · · · · · ·	\$32,271	58

### The item Fuel and Lights includes

Wood, .	•	•	572 cor	ds 7 feet	5 inch	ies,	•		2554	32
Charcoal,	٠	•	2164 bus	shels, .	•	•	•	•	195	56
Anthracite,	•	•	105 tons	s 340 lbs,		•	•	٠	796	13
Oil, .	•	•	$487\frac{1}{2}$ ga	allons, .	•	•	•	•	434	89
Candles,	•	•	6 lb:	s., .	•	•	•	٠	2	16
Wick, .		٠	•	• •	•	•	٠	•	1	13

2

### Provisions and Groceries include

Fruits, &c.,						•		\$625	25
Salt, spices and	d sma	ll gr	oceries,			•		7.0.4	24
Soap,								452	95
Butter, .				lbs				1746	04
Cheese, .			·	lbs			•	703	96
Eggs, .			-	dozen,			•	95	86
Beans, .				bushels,			•	45	08
Peas, .				bushels,				18	59
Milk, .				quarts,			•		48
Tea, . ·		•		lbs.			•	258	42
Coffee, .		•		lbs				102	91
Shells, .				lbs	•	•		6	59
Biscuit, .		•			•	•	•	87	66
Brown Sugar,				lbs			•	791	36
White Sugar,			-	lbs			•	95	70
Molasses,				gallons,				191	86
Honey			_	lbs. 5 gallo				56	97
Vinegar and C			<del>-</del>	barrels 26				50	02
Rice, .				lbs	_			55	20
Corn, .			752	bushels,	•	•		524	80
Oats, .				bushels,				51	71
Barley, .			_	bushels,			•	30	15
Rye, .			334	bushels,	•	•	•	257	37
Flour, .		•						1373	87
Turnips, .		•	$11\frac{1}{2}$	bushels,	•	•		2	80
Potatoes, .	•	•	1842	bushels,	•	•		545	32
Poultry, .	•	•	$885_{16}^{9}$	lbs. 2 doz	en pige	ons,	٠	83	51
Fresh Fish,	•	626	lbs. 129	shad, 90 r	nackere	el,		57	85
Salt Fish,	•		6706	lbs	•	•	•	170	00
Mackerel,	•	•	3	barrels,	•	•	•	31	75
Salmon, 4 bbls	. <b>7</b> 5 ll	os. sn	noked, 50	lbs. smok	ed Hali	ibut,		58	45
Oysters, Clam	s, Lo	bste	rs, .	• •	•	•	٠	34	34
Tongues and S	Sound	s,	. 2	barrels,		•	•	10	50
Herrings,	•	•	. 2	boxes, .	•	•		1	66
Ham, .	•	•	. $560\frac{1}{2}$	lbs. and s	moking	other	s,	45	40
Mutton and La	amb,	•	$. 1912\frac{1}{2}$	lbs			•	137	95
Beef, .	•		$24,142\frac{1}{2}$	lbs	•	•	•	1236	98
Pork, .	•	•	. 1937	lbs	•	•	•	125	53

Veal,	•	•	4397	lbs.	•	•		•	260	98
Sausages, .			$507\frac{1}{2}$	lbs.		•	•	4	49	55
Tripe,				lbs.					15	94
Tongue,				lbs.	•		•	•	00	25
			_							
								\$	10,675	89
	1	Misc	ellane	ous in	cludes					
Cash advanced to	patients	s an	d cha	rged i	n their	acc	ounts,	or		
paid to them wh	-			_					\$182	17
Expenses after el				•						85
Expenses of send									22	37
Funeral expenses	_								101	50
Postage,									113	
Books, stationery									107	
Three cows and t			_					_		
one horse, .			_						363	00
Expenses of Trus										61
Analysis of water										00
Filling ice cellar,										00
Pasturing, \$30 08										95
Repayment of mo										
paid in advance	•	•		•	•			_		
the time of thei	•						•	•	36	74
OI 7.1	•			-						86
,										
									\$1220	22

No appropriation will be necessary for the current expenses of the ensuing year.

ALFRED DWIGHT FOSTER,

Treasurer of the State Lunatic Hospital.

Worcester, December 10, 1844.

### THE TWELFTH REPORT

OF THE

### SUPERINTENDENT TO THE TRUSTEES

OF THE

### STATE LUNATIC HOSPITAL,

WORCESTER, MASS.,

From Dec. 1st, 1843, to Nov. 30th, 1844, inclusive.

It is now twelve years since the Hospital was opened for the reception of the insane. During this time there have been admitted into its wards 2013 patients. There have been discharged 1750, of which number 916 have recovered, 151 have died, and 683 have been discharged in various conditions, some greatly improved, some with improved health and habits, others as harmless and incurable, for want of room, and a few have been sent back to the jails and houses of correction for the same reason.

We have had from the commencement a succession of prosperous seasons, an unusual exemption from mortality, and such success in the recovery of insanity, as calls loudly for gratitude to the Giver of all good for his protection, guidance and blessing.

The Hospital has been for a long term, in such a crowded state as to render additional accommodations necessary; the pressing demands for admission being far beyond the means of relief.

In 1843, the Legislature decided to add to the Hospital one hundred and fifty apartments, and to expend for this purpose a fund given to this institution by George and Martha Johonnot, who, in their last will, made it the residuary legatee of their estate. From this source the Hospital came in possession of a legacy of about \$43,000, which has been expended according to the original design of its benevolent donors, that of adding to the accommodations for the insane in this Commonwealth.

The additional wings, part of which are now nearly ready for occu-

pancy, extend in front, from the present verandahs, 66 feet, with a return wing from the southern extremity of 100 feet, and from the north of 75 feet. These buildings contain 160 apartments for patients, and such attendants and assistants as may be necessary to take charge of them.

The walls throughout the building are hollow, to increase their dryness and to admit the plastering to be made on the brick surface, a consideration of some importance in a hospital for the insane.

The rooms are 8 feet by 10, each has a window secured by a cast iron grating corresponding with the sash, so as to remove all offensive appearance. There are also ventilating openings over the doors, and two orifices in the inner wall of each room which terminate in the attic story, from whence the foul air escapes through the sky lights and windows. The halls are 12 feet wide, those of the front wings crossing those of the lateral wings at right angles. There are dining rooms in each story, to which the food is transferred from the kitchen by dumb waiters. There are also, sink rooms, water closets, &c., connected with each gallery.

The kitchens, containing the most approved apparatus for cooking, conveying water, &c., are in the basement story. Here are also placed the furnaces for warming and ventilating the whole building.

The verandahs have been enlarged ten feet in width, and through them we have easy access from the new wings to the centre building.

The whole building presents a front of five hundred and twenty-five feet, this with the four lateral wings, Johonnot Hall, the chapel, infirmaries, bakery and solitary, which are all connected, make a range of thirteen hundred feet, besides out buildings, shops, laundry, &c.

The new laundry is a commodious building, about 100 feet south east of the eastern extremity of the south wing. It is 50 feet long by 30 feet wide, consisting of basement, centre, and attic stories, appropriated to washing, drying and ironing the clothes. The wash room is fifty feet by twenty. In this room is a steam boiler, which heats all the water for washing, steams the clothes, and warms this large room and the ironing room directly over it. Warm and cold water are conducted to each tub by pipes and are again let off, after being used, by valves at the bottom of the tubs, a press is used as a substitute for wringing, dumb waiters carry the clothes to the attic, which is heated for the purpose of drying in winter and bad weather, and every arrangement is made for facilitating the labor in this department.

Over the wash room is a room of the same size for ironing, and

airing the clothes. One end of this room is partitioned off as an airing room for the clothes after ironing, the furnace for heating the irons is placed in this partition,—the pipe of which passes around the room and affords sufficient heat for drying. Through the centre of this room runs the steam pipe for warming which is connected with the steam boiler below, over this is the ironing table where the laundress and her assistants, with a suitable selection of patients ply the irons. At the end of the room is the mangle by which much of the heavy work of this department is accomplished.

Besides these rooms, this building has a convenient cellar, in which is the tank for water with suitable pipes and cocks for the regulation of the water for the whole establishment; a kitchen and rooms for the accommodation of a family and the persons employed.

A bakery and rooms for the seamstresses are now being erected on the site of the former wash house, which has been recently removed to another location. This building, sixty feet long and twenty wide, occupies the space between the chapel and the infirmary. It is to be two stories high and to contain eight rooms, suitable for the labor, board and lodging of all the persons employed in these two departments.

These buildings, with the Johonnot Hall, erected last year from the funds left by the benevolent woman whose name it bears, compose the projected improvements which will add greatly to the comfort of the establishment.

When these accommodations are completed, the Hospital will afford room for 400 patients, and apartments for nearly 100 other persons, most of whom are in some way employed about the establishment.

The operations of the Hospital have been upon a more extended scale than any former year. The number of admissions and discharges has been greater, the number of residents more numerous, and more patients have recovered. The number of patients at the close of the year, (263,) exceeds the number of rooms by more than thirty. This number has been suffered to accumulate, with much present inconvenience, from an unwillingness to send patients away, when additional rooms will so soon be in readiness to accommodate all, we trust, who may desire a residence within the wards of the hospital.

The interest in such institutions, has evidently greatly increased within a few years. The number of recent cases admitted is greater than at any former period, and in most of them the friends of the insane, desire to avail themselves early of the benefits of the Hospital. In the course of the last year quite a number of individuals have been

brought to the institution the first week of their illness, and many more within two, three, or four weeks. These are favorable indications, and induce a hope that insanity will be diminished, that fewer cases will be suffered to assume a chronic form, and the sufferings attendant upon this great calamity be essentially lessened.

Following this brief description of the new buildings, I present the usual tables deduced from the records of the Hospital. On examining the tables heretofore presented in reports, with reference to the value of their statistics, I cannot persuade myself to omit any. I am aware they are of unequal value, but I trust none are wholly useless or uninteresting. All the tables given are designed to present facts only. If the numbers cannot all be vouched for as mathematically correct, they approximate so closely to facts as to be safe for ordinary estimates.

If we present reports, of what shall they consist? Not, surely, of essays on insanity, theories and views irrespective of the statistics which we gather in the institutions. These would of course do little to impress the public mind of the value of our observations. If our views and theories are founded on facts, and are supposed to derive weight from our experience and observation, why not present these facts as succinctly as possible, in tabular or other forms? They are unsafe for us if they are unsafe for others.

Fully believing that the statistics of insanity, are as valuable as any other vital statistics, I shall not discard them, but hope to see them extended and perfected till they be found wholly correct and entirely reliable.

### TABULAR VIEW

Of the Condition of the State Lunatic Hospital, from December 1st, 1843, to November 30th, 1844, inclusive.

Periodical.	Homicidal, do do do do	Period.	Pauper. Periodical. do	
Hereditary.	Hereditary.  do do do do do Homicidal. do Hereditary.	Demented. Homicidal. Hereditary. Periodical.	Foreigner. Demented. Hereditary. do	
In what state.	Improved do Stationary Improved Stationary do Improved Stationary do do do Improved Stationary Stationary	Stationary Improved do Stationary do	do do do do Improved Stationary	, op
Discharged or Remaining	10 mths Remains 10 mths do 10 mths do 9 mths do 9 mths do 9 mths do 8 mths do 8 mths do 5 mths do 5 mths do 1 mth do	3 mths Discharged Improved 8 mths Remains Stationary 7 mths do Improved 5 mths do Go do Gationary	op op op op	
Time spent in the Hospital.	yrs 10 mths yrs 10 mths yrs 10 mths yrs 9 mths yrs 9 mths yrs 9 mths yrs 9 mths yrs 8 mths yrs 8 mths yrs 8 mths yrs 8 mths yrs 6 mths yrs 7 mths		yrs 7 mths yrs 6 mths yrs 4 mths yrs 2 mths yrs 10 mths yrs 7 mths	
By whom com- T mitted.	Court 111 Court 111 Court 111 Court 111 do do 111	Overseers 10 Court 10 do 10 do 10 do 10 do 10	do do 9 y do	8
Duration before admission.	7 years The 6 do 10 do The 14 do The 5 do 16 do 16 do 17 do 16 do 16 do 17 do 16 do 17 do 16 do 17 do 17 do 17 do 18 do 19 do	10 do The 3 do The 6 do 10 do 6 do 2 months	Unknown 6 years 6 do 4 do 6 do 6 do	
Supposed Cause.	Religious,	Disappointed affection, - Jealousy of wife, - Unknown, - Domestic affliction, do	ance,	i,
	wer Religious, - Intemperance, Unknown, - wer Intemperance, do do Masturbation, Intemperance, do Ner Religious, - Disappointed a	73	Intemperance, Ill health, - Intemperahce, Masturbation, Conknown, -	III health,
Sex. Married single.	Male Widower do Single do Widower Go Widower do Married do Married do Single do Widower do Widower do Widower do Widower do Widower do Widower	Male Single do Single do Married do Married do Married do do Male do do	sale Mile Si.	
	63 Male 44 do 56 do 39 do 66 Fema 37 do 44 do 42 Go 43 Go 43 do	44 Male 40 do 29 do 40 Fema 37 Male 40 do	25 Feme 45 do 52 Male 32 do 35 Feme 40 do	
Time Age when admitted	2 Jan'y 22 7 do 29 8 do 30 12 Feb'y 15 19 do 18 21 do 18 27 do 28 44 March 16 45 do 16 102 June 6 133 Oct'r 19	DOYAEE	308 April 18 319 May 12 347 July 15 367 Octr 1. 1836. 400 Jan'y 28 425 April 12	
No.	11100000000	176 190 209 223 260 278	308 319 347 367 400	43

		Periodical. do	Foreigner. Pauper. Paroxysmal.	Homicidal.	Epileptic. Panner	* Color				
Hereditary.	Hereditary. Suicidal.	do Hereditary. Periodical.	9 p	do do	do Foreigner.	Periodical.	Periodical.	Suicidal. Periodical.	op	Hereditary.
Stationary do do	Improved do	Stati	-1 -do	op op	do do	Imp Stat Imp	do Stationary Improved	Stationary Improved Stationary		Improved Stationary Improved
6 mths Remains 5 mths do 2 mths do	9 mths Discharged 9 mths Remains 8 mths do		mth Remains Discharged Remains	op op	9 mths Died 9 mths Remains 9 mths		9 mths do 7 mths do 5 mths do	mths do mths do	D W	8 mths do 8 mths do 8 mths do 5 mths do
8 yrs 6 8 yrs 5 8 yrs 2	7 yrs 9 7 yrs 9 7 yrs 8 7 yrs 8 7 yrs 8	yrs yrs yrs	7 yrs 1 7 yrs 7 yrs		6 yrs 9 6 yrs 9 6 yrs	yrs 5 yrs 9 yrs yrs	yrs yrs yrs	2 70 70 70 8 8 8 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9	yrs 4 yrs 9 yrs 9 yrs 9	4 yrs 8 4 yrs 8 4 yrs 8 4 yrs 8 4 yrs 5
The Court do do	g g g g	දු ද ද ද	දි දි දි	op op	The Overseers The Court	op op op	do do do	The Court do	do do do	99 op op
$\begin{array}{c c} 5 \text{ years} \\ 1 & \text{do} \\ 10 & \text{do} \end{array}$	3 do	a >	10 do 18 months	22 do	Onknown	S G G G G G G G G G G G G G G G G G G G	2 do 2 months 5 years	5 years		4 months 6 years 10 do 2 months
Ill health	Masturbation, Ill health, Domestic affliction,	Disappointed affection, Domestic affliction, Unknown,	Intemperance, - Ill health, - Disappointed affection	. — —	Intemperance, - Unknown, -	Ill health, Masturbation, - do	Ill health, Domestic affliction, do do	Domestic affliction, Masturbation, Indulgence of temper	ಲ	Disappointed affection, Ill health, do Exposure to wet, -
Married Single do	Single Widower Single Widow	Single do	do Married Sinole	do Widower	Married Single	9 op op		Widow Single Married		do do Widow Single
Female Male do	Male do Hemale Female		do do Female	A	do Hemale	Ä		do do Male Female		Hemale do Male
435 May 6 48 451 June 28 40 488 Sept. 22 30	518 Jan. 9 20 532 Sept. 8 62 545 March 8 34 547 do 10 68	May 26 Aug. 5 Sept. 9	648 Oct. 5 45 658 do. 22 27 666 Nov. 4 37	do 22 Dec, 1 1838	718 Feb. 15 58 719 do 15 20 721 do 15 30	June 24 Aug. 20 Dec. 27 1839	171	do July do	Aug. 5 Sept. 9 do 16 Nov, 2	1078 March 28 1092 April 21 26 1095 do 29 45 1115 June 11 25

### TABLE -- Continued.

Periodical. Homicidal. &c.	Hereditary.
Hereditary.	Hereditary, Periodical, Hereditary, Foreigner, Periodical, do do do do do do do do
In what state.	Remains Improved do
Discharged or Remains.	
Time spent in the Hospital.	<b>→</b>
	4444444444         000000000000000000000000000000000000
By whom committed.	The Court do The Overseers The Court The Friends The Friends The Fourt do
Duration before admission.	8 months 8 years 8 years 9 years 9 years 24 do 26 do 26 do 17 do 112 years 7 years 7 years 7 do 12 years 7 do 12 years 6 do 5 do 1 months 20 years 2 do 20 years 2 do 20 years 2 do 21 years 3 do 15 do 16 do 17 do 18 do 19 do 10 d
Supposed Cause.	Religious,
Sex. Married or Single.	Female do
Age when ad- simitted.	81 Fema 50 Male 60 Go
Time of admission.	1840. 1840. 1244 do 125 do 125 do 25 los 125 do 125 do 25 los 125 do 10 los 125 do 25 los 125 do 25 los 125 lo
No.	1114444111569111569111569111569111569111569111569111569111569115691156911569115691156911569115691156911569115691156911569115691159115

											Hereditary.	•										1)			10							
Hereditary.			do	Feriodical.		op	op	do	Suicidal		Periodical.	Hereditary.	Periodical.					Hereditary.	do	do.	qo	Periodical.	Hereditary.	do D	Paroxysmal, Poriodical	r enouncai.	3	Hereditary,	, op	op	do Periodical.	
Stationary	do Improved	ф ф		Stationary	Stationary			Stationary		op	op	op	Improved	Stationary	Improved	Stationary	g op	op	qo			Improved	Stat	Improxod	do Stationary	do	Improved	op			Improved Stationary	*
7 mths Discharged Stationary	11 mths Remains 11 mths do	4 mths Discharged on the Remains		ns Kemanns Discharged		Remains			is do		ns Remains				as do						Discharged	3 mths Remains	Discharged	Dischargo	do	op	do	2		Discharged	$\frac{\mathrm{do}}{\mathrm{Remains}}$	
yrs 7 mtl	yrs 11 mths yrs 11 mths			yrs 10 mths				yrs 8 mths		l	yrs 6 mths		yrs 5 mths			yrs 4 mins				yrs 4 mths	yrs	yrs	mths	yıs	do do	do	do	yrs 1 mth	yrs 1 mth	15 mths	do yrs 1 mth	
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s  The Court	do do	13	The Friends	The Cor				op op				op	IS		vii do		S	The					s do			op				ths do	The Overseers  The Court	
1,-   3 years	- 11 do - 3 do	20 months	- 4 do	- 8 do - 18 months	- 3 do	- 2 years		30 years	- 4 months	2 years	- 4 do	op 9	- 9 months	- 5 years	- Unkilowii	o monus	- 9 months	- 12 years	25 do	- 4 do	2 months	3 do	- 3 years	- 41 years	- 24 do		- 16 months	op 9 -	-	7	- 10 do	•
Disappointed ambition, -	rbuse.	ion,		agnetism,	nce, -				1		ion,		1	6			1	0		1			1		1		nt, -	usband, -	1	1	ion,	
	Parental abuse. Unknown,	do Masturbation,		Animal Magneti Fear of poverty		Unknown,	op.	do Daralueia	Unknown	op	Masturbation,	op	Unknown	Epilepsy	O IIK	9 6	Ill health.	Unknown	op	Ill health,		op :: 4	Keligious,	Tinknown	do	op	Excitement	Loss of husband	Unknown,	III health,	Masturbation,	-
Female Married	Single	op 	Married	de do	Married	Single	E E	do lo Widow	ر د		op		le	g- G	Te M						M_		ne	do	99	op			Single	n e	90 —	_
35 Fems	27 do 31 Male	22 29 do		58 Female	24 Male	·		67 Male	1					18 Male			<u> </u>			<u> </u>			40 Female				-				28   do	
v. 24	n. 1 o 6	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0				0 28	ch	0 20					0 20		,-					0 17		ot.	0 0		300			6;			0 17	
1356 Nov.	1371 Jan. 1375 do	1387 do 1390 do		1397 Feb.				1423 do		1432 do	1455 May	1464 June		1470 do	14/4 July	1480 do	-	1488 Au			1495 do	$\mathcal{D}$	1499 do			0					1535 do	

Periodical. Homicidal, &c.	
Hereditary.	Hereditary. Periodical. do Hereditary. Go do
In what state.	Discharged Improved Stationary Discharged Remains Go
Discharged or Remains.	
Time spent in the Hospital.	19 months 2 yrs 1 mth 2 yrs 1 mth 2 years 2 years 20 months 10 do 23 do 25 do 26 do 27 do 20 do 20 do 20 do 20 do 20 do 20 do 21 do 20 do 21 do 22 do 24 do 25 do 26 do 27 do 28 do 29 do 20 do 20 do 21 do 21 do 22 do 24 do 25 do 26 do 27 do 28 do 29 do 20 do 20 do 20 do 21 do 21 do 22 do 24 do 25 do 26 do 27 do 28 do 29 do 20 do 20 do 20 do 21 do 21 do 22 do 23 do 24 do 25 do 26 do 27 do 28 do 29 do 20 do 20 do 20 do 20 do 21 do 21 do 22 do
By whom committed.	The Court do
Duration before admission.	6 months 3 years 1 year 2 years 3 do 3 do 3 do 3 years 10 do 2 do 6 months 6 months 6 months 2 years 6 months 2 years 4 weeks 2 years 4 weeks 2 years 4 weeks 6 do 6 do 6 do 6 do 6 do 6 do 7 do 7 do 7 do 6 do 6 do 6 years 7 years 8 years 9 years
Supposed Cause.	Trouble in business, Unknown do Unknown, Masturbation, do Love affair, Inventions, Family trouble, Unknown, Trouble, Unknown, do do Religious, do do Religious, Cove affair, Religious, Masturbation, Trouble, Unknown, Hoowed fever, Epilepsy, Love affair, Religious, Masturbation, Trouble, Unknown, do Religious, Hoowed fever, Epilepsy, Love affair, Religious, Old age, Epilepsy, Wound on the head, Religious, Masturbation, Unknown,
Married or Single.	Widower Married Go do
Sex.	Male Female Male Go do
Age when admitted	820118887788 888748871887815847 82011888778877887788778
Time of admission.	1842.  Nov. 31  Nov. 3  do 9  do 19  do 16  do 14  do 14  do 14  do 15  do 23  do 24  do 25  March 15  do 25  do 27  April 6  do 28  do 29  do 20  do
No.	1543 1546 1546 1554 1554 1555 1557 1557 1577 1588 1588 1588 1598 1600 1600 1600 1617 1627 1638 1638 1638 1638

		Suicidal.		
Periodical.  Hereditary.  Periodical.	do do do Hereditary.	do do do	do Periodical. dò Hereditary.	do Periodical, do
Discharged Recovered do do do do do do do do Grationary do Grationary do Stationary Improved Discharged Recovered do Improved do Improved	Recovered Improved Stationary Improved Recovered Stationary		Recolumn Recolumn State	d do do Recovered do Improved Recovered Stationary
Discharged do do do do Remains Discharged do	do do do do do Remains	Died Remains Discharged do Remains Discharged do do	Discharged do do Remains Discharged do do do do do	Discharged do
10 months 9 do 16 do 14 po 8 do 7 do 18 do 12 do	7 do 8 do 11 do 6 do 10 do 17 do	12 do 17 do 12 do 17 do 6 do 6 do 6 do		10 do
weeks The Court months do years do the Friends The Friends The Court do years do years do years do		The 1	hs The The The hs The hs The The	ths The Overseers The Court Standard The Court do do
		A CONTRACT CONTRACT	NH NN NH N NH N	3 do 3 do 1 year 4 months 2 do 2 weeks 3 months
An injury in falling, Trouble, Masturbation, Intemperance, Unknown, Age and trouble, Unknown, Trouble, Loss of wife.		Religious, Unknown, Paralysis, Ill health, Periodical, Loss of husband, Periodical, Fear of poverty,	Religious, Unknown, Epilepsy, Unknown, Religious, Unknown, Fright, Intemperance, Loss of husband,	Unknown, Trouble, Unknown, do Domestic affliction, Unknown,
Female Single do Married Female Single do Male Widower		N S W S S W S		Married do Single do Married Widow Married
				Male do Female Male Female Female Male Male Male Male Male
24 24 24 29 29 29 35 35 35 36 36 37 36 37 36 37 37 37 37 37 37 37 37 37 37 37 37 37		222 222 223 223 230 244 245 243 244 243 244 244 245 244 245 245 245 245 245 245		25 10 10 10 68 14 26 20 20 40 28 37
1639 April 1640 do 1641 do 1644 do 1653 do 1659 do 1659 do 1659 do	do do do do	9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Aug.	1712 do 1713 do 1714 do 1717 do 1719 do

Periodical. Homicidal, &c.	Hereditary.
Hereditary.	Hereditary. Periodical. Suicidal. Hereditary. Periodical. do do do do do do do Hereditary.  Go do
In what state.	Discharged Stationary do d
Discharged or Remains.	Discharged do Died Discharged Remains Discharged Remains Discharged Remains Discharged Go do
Time spent in the Hospital.	09 co
By whom committed.	The Overseers The Court do The Friends The Court The Court The Court do do do The Friends The Court do do The Friends do
Duration before admission.	5 weeks 4 do 1 year 3 months 6 weeks 4 do 3 do 1 year 6 months 7 years 7 years 6 months 5 years 7 years 7 years 6 months 5 years 7 years
Supposed Cause.	Fear of poverty, Intemperance, do Unknown, do Intemperance, do Intemperance, do Intemperance, do Intemperance, Unknown, Ill health, Religious, Trouble, do Trouble, do Unknown, Ill health, do Unknown, Ill health, do Unknown, Ill health, do Unknown, Ill health, do Unknown, Intemperance, Unknown, Interperance, Unknown, Int
Married or Single.	Married do Married do d
Sex.	Male do do do do do do do Male Female Male Female Male Female Go do Male Hemale Male Ao do
Age when ad- mitted.	5 c c c c c c c c c c c c c c c c c c c
Time of admission.	Aug. 28 do do 31 do do 33 do 44 do do 26 do do 28 do 66 do 6
No.	271 271 271 272 271 272 271 272 271 272 272

Periodical  Periodical	
	1). LJ.
Hereditary.  do Periodical. Hereditary. Periodical. Hereditary. do Go  Beriodical. do Hereditary. Periodical. do Go	Periodical. Hereditary Periodical.
Recovered Stationary Recovered do do do do Stationary Recovered do Stationary do Stationary do Stationary do Stationary do Stationary Improved do do do do do do do do Stationary Improved do Recovered do Stationary Improved do Stationary Stationary do Stationary	Recovered do do
Discharged Recovered Remains do Remains Stationary do Recovered Remains Grationary do Go Discharged Recovered Remains Go Bemains Stationary do do Discharged Recovered do do do Discharged Recovered do do Discharged Recovered do do do do Discharged Recovered do do Recovered do do Discharged Recovered do do Recovered do do Discharged Recovered do Stationary Improved do do Stationary	Discharged do do
7 weeks   10 do   10	3 do 4 do 3 do 9 weeks
The Friends  The Court do The Friends The Court do do do do do do do do The Overseers The Court do d	16 16
9 months 6 do 7 years 10 years 3 months 2 weeks 4 do 6 months 2 years 6 months 1 year 2 years 6 months 1 year 2 years 3 do 1 year 3 do 1 year 3 do 1 year 3 do 1 year 4 do 1 year 5 years 3 months 1 year 6 do 1 year 2 do 1 year 3 months 1 year 6 do 1 year 7 years 3 months 1 year 6 do 1 years 3 weeks 3 months 1 year 6 do	week months weeks week
Anxiety of mind, Periodical, Periodical, Rehioloral, Family trouble, Anxiety of mind, Rehigious, Ill health, do do do do Religious, Ill health, Paralysis, Unknown, Resigious, Ill health, Paralysis, Periodical, Periodical, Periodical, Periodical, Periodical, Periodical, Periodical, Religious, Religious, Ill health, Resligious, Religious, Ill health,	Religious, Family anxiety, Ill health, Influenza,
Married do Widow Widow Widower Widower Widower Widower Widower Widower Widower Widower Widower Go	Single Married do Widow
Female Male Go do do do do do do Male Female Go Male Go Go Male Female Go Go Male Female Go Go Go Go Go Go Go Go Male Female Male Female Male Go	ale
44747488848884888488888888888888888888	82 4 5 83 5 75
80004731118000114788888 447000118847	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	do do do
1754 Oct. 1755 O	1790 1791 1792 1793

Periodical. Homicidal, &c.	Hereditary.			Periodical.	op op	o p
Hereditary.	Periodical, do	Hereditary. do do Periodical.	Hereditary. do do do	Hereditary.	óp op	op op
In what state.	Discharged Stationary do Recovered do do do	do do do do Remains do Discharged Recovered Remains Improved do Stationary		do Improved Recovered do do	Improved Stationary Improved Stationary	Discharged Recovered Remains Improved do Stationary do do Discharged Recovered
Discharged Or Remaining	Discharged do do do	do do Remains Discharged Remains do	do Discharged do Remains Discharged	000000	Remains Improved do Stationar Died Stationar Died	Discharged Remains do do Discharged
Time spent in the Hospital.	11 months 7 do 3 do 4 do	10 weeks 10 do 10 months 7 do 11 do 11 do		3 do 6 do 10 weeks 13 do 6 months		
By whom committed.	The Court do The Overseers The Friends	The The	The The		The Overseers The Court do	The The The The The
Duration before admission.	14 years 6 weeks 6 do 4 do	50 years 8 months 3 years 5 months 7 years	3 do 4 weeks 20 months 4 years 4 weeks	2 years 2 week 3 months 9 do	2 do 2 years 4 do 1 do	2 weeks 2 years Unknown 3 months 1 week
Supposed Cause.	Disappointed affection, - Periodical, Influenza, Amenorrhæa,	Unknown, do Ill health, do Unknown,	Unknown, Property,	Anxiety about property, Ill health, Domestic trouble, Periodical, Chorea St. Viti.	_	Ill health, Masturbation, Conknown, Followed fever, Religious,
Married or single.	Single Married Single do	Widow Single do do do	do Married do do do	Married Single Married do Married	Single Married do Single	do do do do Married
Sex.	Female do do	do Male Female do Male	do do Female Male do	do do do Male Female	do do do Male	Female Male do Female Male
Age when admitted.	42 51 25 26		ಚ ಬ 4 ೮ ೮ ೧ ೫ ಗು ಗೆ ಐ ಗು ೧	0000049 000047	35 30 30 30	20 20 20 20 20 20 20
Time Age of when admission admitted	1843. Dec. 25 do 26 do 27 do 27 1844.	Jan'y 2 do 4 do 6 do 9 do 9	do do 15 do	ф ф ф ф ф	do 24 do 26 do 5 do 5	200 do 000 do 00
No.	1794 1795 1796 1797	1798 1799 1800 1802 1802 1803	1805 1805 1807 1807 1808	1810 1811 1812 1813 1814	1815 1816 1817 1818	1820 1820 1821 1822 1823

Periodical.
Hereditary.  do  do  do  do  do  do  do  do  do  d
Discharged Recovered do d
Discharged do Discharged do do Discharged do Discharged do Discharged do Discharged Remains Discharged Remains
## months   ## mon
The Friends  The Court  do  do  do  do  do  do  do  do  The Court  do  The Priends  The Court  do  do  do  do  do  do  do  do  do  d
5 months  Conknown  do  6 months  7 months  2 months  3 months  9 months  9 months  2 years  9 months  7 years  9 months  7 years  9 months  7 years  1 year  1 year  10 years  2 years  3 months  4 years  1 year  10 years  3 do  5 years  4 years  1 year  1 year  1 year  1 year  3 do  8 do  1 year  1 year  3 do  8 do  1 year  3 do  8 do  1 years  3 years  4 months  3 do
Religious,
Female Single do
- 18818244817414388888882818844837448748744488744 - 188081338800000000000000000000000000000
Feb'y 200 do
1824

Periodical. Homicidal, &c.	
Hereditary.	Hereditary. Idiotic. Hereditary. do do do do do Periodical.
In what state.	Improved Stationary Recovered Improved Recovered do Improved Stationary do do Go Stationary do do do do do do do do do Stationary Recovered do do do do Stationary Recovered do Stationary Recovered do Stationary Recovered do Stationary Recovered Stationary Recovered Stationary Recovered Stationary Recovered Stationary Recovered Stationary Recovered Stationary
Discharged Or Remaining	Remains Discharged do do do do do do do do do Discharged do d
Time spent in the Hospital.	7 months 5 do 6 do 6 do 6 do 6 do 6 do 6 do 7 weeks 6 do 6 do 7 weeks 8 do 6 do 6 do 7 weeks 6 do 6 do 7 weeks 8 do 6 do 6 do 1 month 8 months 9 do 6
By whom committed.	The Court do do do do The Friends do do The Court do do The Court do The Court do Go The Court do Go The Friends The Friends The Friends The Friends The Friends The Court do do do do do do The Friends
Duration before admission.	1 year 4 months 2 do 3 do 2 years 2 do 6 weeks 5 do 10 days 2 months 5 do 1 year 6 months 7 months 7 months 6 weeks 7 weeks 7 weeks 7 weeks 6 do 1 weeks 7 weeks 7 weeks 6 do 1 weeks 7 weeks
Supposed Cause.	Eruption,
Married or single.	Married Single do Married Widower Single Married Single Married do Married Married Married do do Single Married do do Single Married
Sex.	Male do
Age when ad- mitted.	084144888888888888888888888888888888888
Time of admission.	April 1844.  April 222  do 223  do 223  do 224  do 225  do 115  do 126  do 226  do 226  do 227  do 226  do 226  do 227  do 220  do 228  do 223  do 223  do 226  do 226  do 227  do 226  do 227  do 226  do 227  do 226  do 226  do 227  do 226  do 226  do 227  do 226  do 226
No.	1865 1865 1865 1865 1865 1873 1873 1873 1873 1873 1883 1883 1883

-	Periodical.					-	~~~					Hereditary.			ďo	3		do	8						Periodical.	op		moviF-h	-dazaye vizirki					Ç	op	
Stationary			d Improved	g 0	Stationary		Rec	do	Improved	op	Discharged Recovered	Stationary	Discharged Recovered	op	op	Stationary	Discharged Recovered	qo	Improved	Stationary	Discharged Recovered	op	Stationary	op	Discharged Recovered	op d	do	qo	do			Stationary	do	op	Improved	On I
Died	Discharged Remains	do	Discharged	do	qo	Discharged	op	qo	Remains	op	Discharge	Died	Discharge	do do	op	Remains	Discharge	do	do	Remains	Discharge	op	Remains	do	Discharge	qo	do	do	do D	Kemains	Discharged	do	op op	op	<del>දි</del>	20
5 weeks	3 months 5 do	5 do	ئر م م	5 do	5 do	4 do	3 do	5 do	5 do	5 do	4 do	18 days		3 do	3 do	5 do	6 weeks	10 do	.5 do	4 months	2 do	3 do	4 do	4 do	op 6	10 weeks	=		9 <del>-</del>	on #	4 months	4 do			4, 4, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6, 6,	7
months, The Court	op Op		The Friends	do do	op	The Friends	The Court	do	qo	op	qo	op	đo	The Friends	The Court	qo	do	The Friends	do	The Court	qo	The Friends	The Court		The Friends	The Overseers	Tile Court	The True	The Friends	Tue Court	on op	The Friends	The Court	The Friends	The Court	200
5 months	8 do 1 week	2 years	4 do	70	1 week		op 9	4 do	2 do	1 week	$\frac{1}{\tilde{a}}$ do	3 years	3 weeks	6 months	4 do	9 do	2 days	months	25 years	30 do						2 years			7	1 month	18 months		qo	years		
9	1 1	_	sk cmila, -		9	1	1	1		1		1	1 1	0	1	G			0	0	1		8	1	1		8	•	1	1 1			1	1	1 1	
Unknown, -	Ill health, - Intemperance.	Ill health,	Unknown -		Love affair, -	Ill health, '.	Unknown, -	Ill health, -	op	Unknown, -	op .	Periodical, -	Family trouble,	Trouble, -	Periodical, -	Unknown, -	do	op	Periodical, -	Religious, -	Ill health, -	op .	Faralysis, -	Ill health,	Feriodical,	Unknown, -	III licaluli,	Triomporange	Tinknown	Intemporance	Religions	Ill health.	Intemperance,	Periodical, -	Religious, - Intemperance.	la a mara Jamasana
Widow	Single Married	Single	Single	Married	Single	op	Married	op			Single	Married	op	qo	Widow	Single	Widow	Married	op	op do	Widow	Single	do -	qo	do do	Married		Single	مامات	g - C	Married	Single	Married	Widow	do Single	D
Female	do Male	Female	g op	qo	Male	Female	Male	Female	Male	Female	Male	ор —	qo L	Female	op -	op -	op .	Male	op ,	qo	Female	do	Male	Female	Male	uo Female	do	Male	op	g op	Female	qo	Male	Female	do Male	
		48,4																				200		36		#5°					33				45	
		φ α		19							3						0;					200		776										<b>ा</b>		
7		90 20 20 20 20 20 20 20 20 20 20 20 20 20		)1 do								Jana P	op o											00 17 00 00						_<			31 do		35 45 cb cb	-
185	1897	1899	1900	1901	1902	1903	1904	1905	1200	1907	1,000	1909	1910	1911	1912	1913	1914	1915	1916	1917	1918	1919	100	1221	1366	1994	1925	9661	1927	1928	1929	1930	1931	1932	1933	

Periodical. Homicidal, &c.	
Hereditary.	Periodical.  Hereditary.  Hereditary.  do d
In what state.	Remains Improved do
Discharged or Remains.	Remains do
Time spent in the Hospital.	4 months 4 do 4 do 4 do 4 do 5 weeks 3 do 5
By whom committed.	The Court The Friends The Court do
Duration before admission.	10 days 3 weeks 2 years 2 weeks 2 weeks 6 do 1 week 4 months 3 weeks 3 weeks 5 years 4 do 1 week 2 years 4 do 1 week 2 years 4 do 1 week 2 years 3 do 6 years 4 months 3 do 6 years 6 weeks 3 do 6 years 6 weeks 3 do 6 years 6 weeks 1 week 1 week 2 years 3 do 6 years 3 do 6 years 6 weeks 1 year
Supposed Cause.	Periodical,
Married or Single.	Single Married do do do do do Single Married do do do do Married do do do do do Married do do do Married Ao Single Married Ao do
Sex.	Female do Male do Male do Male Go do do do do do Male Female Male Female Male Female Male Female Male Female Male Female Male Go Male Ao Male Female Male Go Male Ao Male
Age when admitted.	244888888884448841888888888888888888888
Time Age of when admitted	Aug. Aug. 44.  do do do do do do 10  do do do 10  do do do 11  do do do 22  do do do 22  do 22  do 22  do 23  do 24  do 25  do 25  do 66  do 66  do 66  do 66  do 66
No.	1935 1935 1937 1937 1938 1940 1944 1944 1944 1945 1956 1956 1956 1966 1966 1966 1966 196

op	Periodical. Hereditary. Periodical.	Hereditary.	Periodical.  do  Hereditary.
Stationary do Improved do Stationary Recovered Improved do IRecovered Improved Stationary do Improved Stationary do Improved Stationary do Improved Stationary do	do do do Improved do	do do do do Stationary	do do do do Improved Stationary Improved Stationary do Improved
Died Remains do do do Discharged Remains do do Discharged Remains do do do do do	do Died Remains do do do do	g & & & & & & & & & & & & & & & & & & &	0
7 days 3 do 6 do 7 days 6 do 7 days 7 days 8 do	2 do 6 weeks 7 do 7 do 7 do 7 do	7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	ン で ひ 4 4 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
AAA AA AAA	do do year years months weeks years months The	s The The hs The True True Truc	- 1 year do
Religious, Trouble, Onknown,	දි දි දි දි දි දි දි	Ill health,	Puerperal, Religious,
<u>ə</u> <u>ə</u> <u>ə</u>	le le		do Married do do do do do do do do do Married Married do
048989888888888888888888888888888888888	18 18 18 19 19 19 18 18 18 18 18 18 18 18 18 18 18 18 18	16 19 19 19 20 20 22 23 20 35 35 35 35 35 35 35 35 35 35 35 35 35	33 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1982 do 1983 do 1985 do 1986 do 1987 do 1988 do 1989 do	000000000	•

&c.								
Periodical. Homicidal, &c.							•	
Hereditary. Suicidal.	Hereditary.		Periodical.	do				
In what state.	Improved	Stationary	Improved	Stationary	, op	op	op	do
Discharged or Remains.	Remains	do	op	qo	qo	qo	qo	qo
Time spent in the Hospital.	2 weeks	2 do	11 days	10 do	op 6	3 do	3 do	2 do
By whom committed.	The Friends		The Court	Ă.		qo	The Court	The Friends
Duration before admission.	2 months The	2 years	1 week T	6 weeks	4 years	12 do		
Supposed Cause.		Unknown.		Periodical,	Intemperance,	Unknown,	Trouble,	Religious, -
Married or Single.	Single	Widow	Male Married	Widow	Married	Single	Married	op
Sex.	Female	qo	Male	Female	Male	Female	Male	Female
Age when ad- n. mitted.		26	47	92	4	39	<u>2</u> 2	27
Time of dmission.	1844. ov. 18		do 19					
No.	2006 N	2007	2008 do	2009	2010	2011	2012	2013

TABLE 1.

Showing the Committals from each County in the State, the present and previous years.

						1844.	Previously.	Total.
Barnstable,		•	Males, . Females, .	•	•	3 2	36	41
Berkshire,	•	\$•	Males, . Females, .	•	• .	5 3	54	62
Bristol, .	•	•	Males, . Females, .	•	•	10 11	103	124
Dukes, .	•	•	Males, . Females, .	•	•	0	6	6
Essex, .	•	٠	Males, . Females, .	•	•	14 15	240	269
Franklin,			Males, . Females, .	•	•	1 0	68	69
Hampden,	•	•	Males, . Females, .	•	•	4	78	86
Hampshire,	٠	•	Males, . Females, .	•		4 7	102	113
Middlesex,	•	•	Males, . Females, .			19 16	189	224
Nantucket,	•	•	Males, . Females, .			1 1	12	
Norfolk,	•	•	Males, . Females, .			15 16	173	204
Plymouth,	•	•	Males, . Females, .	•		2 8	75	85
Suffolk, .	•	•	Males, . Females, .	•	•	16 8	186	210
Worcester,	•	•	Males, . Females, .	•	•	16 35		
Private l	boar	ders,	·	•	•	0	449	500 6
4						236	1777	2013

The government of the State in its beneficence has established this Hospital, and assumed the payment of the salaries of its officers, and tenders its use, and their services for the relief of the insane. It is a noble monument of its public spirit, and regard to the wants of suffering humanity.

The charge for support at the Hospital embraces only the cost of board and the supervision of attendants and other assistants, who are all, in one way or another, devoted to the interests of the patients.

It would appear, from the table, that this benefit was unequally distributed; some counties having many, others comparatively few inmates in its wards. But the counties receiving most benefit bear the greater proportion of expense, and those most exempt from the malady which renders its establishment desirable, have most cause for thankfulness. It is a blessing when necessary, but the greater blessing not to need, or be obliged to use it.

It is the high honor of this ancient Commonwealth to be the first and foremost in providing for its insane. Its accommodations are more ample and probably not inferior to those of any other community in the world. It is to be hoped that they will be found sufficient for all its demands, and that a long time may elapse before they are fully occupied.

TABLE 2.

Showing the number of Admissions, and the state of the Hospital, from Dec. 1st, 1843, to Nov. 30th, 1844.

Patients in the Hospital in the course of Males, Females,	f the year,
At the commencement of the year, Males, Females,	
Admitted in the course of the year, Males, Females,	109
Remain at the end of the year, Males, Females,	128
Patients admitted, 236 Males, 109 Females, 127—236	Patients now in the Hospital, 263 Males, 128 Females, . 135—263
Cases of duration less than one year, 131 Males, 49 Females, 82—131	Cases of duration less than one year, 51 Males, 19 Females, 32—51
Cases of longer duration than one year, 105  Males, 60  Females, . 45—105	Cases of longer duration than one year, 212 Males, 109 Females, . 103—212
Cases committed by the Courts,	Foreigners discharged the last year,
Foreigners now in the Hospital,	Applications not received at the time, 107  Not received at all, most-ly for want of room
	ly for want of room,

In the course of the last year seven cases of insanity, found by the Commissioners of Lunacy in the Massachusetts Prison, came into the Hospital. Three of these men were sent to the Hospital in the month of April. One had been in confinement nearly seven years, almost

constantly in a solitary room of the prison, without labor, and almost without exercise. He had delusions, supposed himself rich, and gave away, as he declared, large sums of money. He stated to the commissioners that he had \$150,000 a day for services, was worth \$360,000,000, and received "great legacies to pay for highway robberies." He will not labor as he has plenty of servants to do his work.

This man is now in improved health, civil and respectful. He attends religious services every Sabbath, and family prayers frequently in the evening. He is evidently insane, but during the eight months that he has been in the Hospital has had no outbreak of violence, nor any marked periodicity or lucid interval. He appears better, is social in his feelings, unites in games with his associates, and enjoys himself well in his new situation. It can hardly be expected that he will recover.

Another of these unfortunate men was in the Hospital apartment of the prison, recovering from illness, when visited by the Commissioners. He was a colored man, born a slave, and was supposed to have escaped from his master in Baltimore. He had been in solitary confinement four months previous to this illness. His delusion was respecting a "perpetual motion" which he had discovered, and which the world were using to move steam-boats, rail-cars, and all kinds of carriages. He too was rich, and thought himself a prophet. This man was not well when he came to the Hospital, was troubled with asthmatic breathing and some cough. Insanity was clearly marked in this case. He talked much of his perpetual motion. He was fond of playing the violin, in which amusement he was indulged, though he had no knowledge of music; he attended church on the Sabbath when able, and though quite insane, and occasionally considerably excited, was He was attacked with lung fever in July, and died never troublesome. in a few days.

The third person sent to the Hospital at this time, was a foreigner, by trade a glass blower, and by far the most violent and dangerous of the three. He had false hearing, and had attempted to kill one or more of those persons whom he supposed were talking to him or about him. From this false hearing came his delusions. Since he has been under our care, he has had turns of violence and great trouble from this source. When excited, he is disposed to be quarrelsome and suspicious of his attendants. At these times he fills his ears with bread, wax, or

wool, to remove the disagreeable noises which annoy him excessively. He is not always equally excited, but is never a safe man to be at large. His health is bad, owing to internal hemorrhage, which has occurred occasionally for some years, and which tends to increase his irritability and excitement.

On the 9th of September, the other four insane prisoners were brought to the Hospital.

The first on the list attempted homicide. He was not supposed insane when he committed the act. After a time he began to complain of his ears, said there were "worms in them." He gradually went into a dull, stupid state, and became speechless. For some time previous to the meeting of the Commissioners, he assumed nearly the same posture on the floor every day, took his food irregularly, and was never found asleep. Since he came to the Hospital, his appearance has been similar; he sits all day, unless compelled to move, in one position, his countenance is downcast, he is silent, never having uttered a word to any one, he neither turns his head to the right nor left, or moves his lips when spoken to, or urged to speak. At first he took little food, recently he has eaten better and gained some flesh. He has attended meeting a few times, on the Sabbath, and appears precisely as he does in the ward. His health is improving, and there is some ground to hope that he may yet be better, and perhaps ultimately recover. No one who examines the case can doubt of his insanity.

Another of the prisoners is a young man, about twenty years of age. He did not appear insane when committed to the prison in Oct., 1843, but became so soon afterwards. He was incoherent, talkative and noisy for some weeks in succession, and then became dull and silent for a season—was inclined to keep his bed, and, when urged to talk, appeared no more rational than when excited. Sometime before the meeting of the Commission in Sept., he again became excited and continued so till the time of the meeting. When first seen by the Commissioners he talked incessantly, was very profane, and laughed much and loudly. His eyes were red, his pulse frequent, and every thing about him indicated insanity. He was also a victim of self-pollution, probably the cause of his disease.

There was no change in him, after he came to the Hospital, till he took large doses of medicine, since which time he has gradually improved in his appearance and conduct. He is now quiet at night, talks less, is more easily controlled, labors some, has attended meeting on

the Sabbath, and has some indications of improvement which may, perhaps, result in complete recovery.

The next of the four on our list is a colored man, who was committed to prison in June last. He was quite violent at first, but afterwards became more quiet, and told his story of what had occurred to him since his pardon from the prison in 1839. He called himself God, President, King, &c., talked loudly, tore his clothes and bedding, and rubbed his straw to powder. Since he came to the Hospital he has been less violent, he still says he is God, but if any one else wishes to be God, he will give up his claim, there was no God at the prison, so he would be one. His eyes are blood-shot, and his countenance vacant. He now says but little, works some, attends chapel on the Sabbath, and is harmless and inoffensive. When in prison, his first outbreak was in the chapel, during religious service.

The fourth and last of the seven prisoners sent to the Hospital, was convicted of highway robbery. He had been in prison before, and left at the expiration of his sentence. After his re-committal, more than a year before he came to the Hospital, he was well enough to do some labor, but appeared eccentric and strange. He had a sudden outbreak in the shop where he was at work, after which he did no labor. He claimed to be the Savior, said that he had spiritual intercourse with individuals abroad, and could accomplish many things at remote distances. He reads the Bible, talks much about it, and quotes it for all purposes. He has a Sabbath of his own, which is on Tuesday. When at the prison he knit from the yarn of cast off stockings, a whole suit for himself, which he put on before the Commissioners. He has not changed in his character or conduct since he came to the Hospital. He has had one outbreak, and then undertook to defend himself from imaginary insults. He claimed the right to defend himself if he was misused, but finally consented to report his grievances and be non-resistant. He talks rapidly and with great freedom of language, but has recently appeared quite inoffensive; he attends church, and works some, he manifests no disposition to change his residence.

It is to be hoped that much good may result from the benevolent action of the government in this matter of insane prisoners, independent of the relief afforded to these individuals who have been, for a considerable time, secluded in places quite unsuitable for them. The prison itself is no place for the insane in any circumstances. They must be confined in close rooms, for their presence, with other prisoners in the

Hospital, or in the shops, would be subversive of all order and discipline. Whenever confined, they should be the subjects of frequent inspection by the medical officer, and every comfort should be afforded them which the nature of the case demands. If the insanity is real, who can so well direct the proper course of treatment as the physician? If feigned, who can so well detect the counterfeit, and expose the imposition?

If it were made the duty of the physician of the prison to examine all such cases from day to day, or even one day in a week, to discover what physical derangement there is in the system, what manifestations of insanity or its counterfeit, the difficulties now embarrassing the Commissioners would be greatly diminished.

It cannot, generally, be a difficult matter for a medical man to distinguish real insanity, if he devotes himself to the case and investigates the condition of the individual. It is a mistaken notion, quite prevalent in the community, that insanity can be easily simulated. This is far from being true. Few individuals, even the most intelligent in society, know sufficiently what are the distinctive marks of any one form of insanity, to counterfeit its symptoms, even if they are the most common that are exhibited in a Hospital. Can ignorant men, destitute of all knowledge of the subject, counterfeit the most difficult and unfrequent forms of disease? It is the ignorant only who can believe such an absurdity.

If the physician of the prison, after examining such cases, and duly considering them, should report his opinion to the officers as a guide to them in their course of discipline, it would relieve those who do not claim a knowledge of insanity from much embarrassment as to their duty. The neglect of this salutary provision tends directly to induce prisoners who are lazy, and choose not to work, to simulate insanity to avoid labor.

Insane prisoners can be induced to labor in the shops or on the grounds of a Hospital where no tasks are imposed, no exactions required, and where silence is not necessary and cannot be compelled. But very different, indeed, is the condition of a laborer in the shops of a prison. There order must be preserved, silence imposed, and every movement must be in accordance with the system adopted. One noisy, irregular person would destroy all the discipline of such an establishment. The management of the insane at labor is entirely different from that of the convict, and they cannot assimilate. It is to be hoped

that the salutary regulations adopted by the government will be continued in force, and be followed by new ones connected with the inspection of such individuals as are feigning insanity, or are really insane.

There are those who seem to doubt whether a guilty, or a wicked man can be insane. Who is there among mankind that comes more directly under the influence of causes prolific in the production of insanity than the prisoner who has been detected in his crimes, whose schemes of wealth or aggrandizement are frustrated, and who is suffering ignominious punishment as the result of his vicious career?

The Warden of the prison entertained no such views, and his conduct towards these unfortunate men was most unexceptionable. He visited all the cases frequently, examined them with vigilance and care, and formed his opinions from his own observation. In this he evinced great benevolence as well as firmness and sound judgment.

To many it seems strange that there should be so many criminal lunatics in this country, and strong suspicions are entertained that the courts are too lenient in thus extending clemency to those who have committed offences. Sir James Graham recently stated in the British Parliament, in a debate on the report of the English Commissioners of Lunacy, that there were in confinement, in the Kingdom of Great Britain, 240 criminal lunatics, 85 of whom were in the Bethlehem Hospital, 33 in jails, and the remainder in the various asylums in the Kingdom.

The English Metropolitan Commissioners recommend separate establishments for criminal lunatics, to be made stronger and of more ready inspection, where separate confinement may diminish the danger which arises from the ordinary intercourse of our asylums.

My experience would not confirm these views, as the criminal insane are often the most harmless and docile in the Hospital. They require care and watchfulness, to be sure, but they can usually be managed with as much safety as any other class of patients who are equally insane.

There have been, in the Hospital, sixteen persons who have committed homicide, and many more who have made assaults with intent to kill. Among this number are many in whom we place confidence, allowing them to be about the premises without particular suspicion.

There may always be some cases of this character, in large public institutions, which cannot be too closely guarded, and for these there should be a few strong apartments, that the public may feel secure, and that such dangerous persons may not regain their liberty. Such was

the notorious Trask, who escaped from our strong apartments, which, on the first inspection, he declared to be like cobwebs, compared with those he left in Boston. Rogers, too, in his periods of excitement, required a room where he could be safe himself, and out of danger of injuring others.

A few such apartments are quite as much needed for another class who should be made subjects of strict inquiry, and frequent observation by those who are fully acquainted with insanity. I allude to those who are arraigned for crime, who are suspected to be insane, and for whom the plea of insanity is to be made. At present, in cases of this description, courts and juries, no less than medical witnesses, are wholly dependent upon the vague testimony of persons of inexperience, often of loose observation, and not unfrequently so connected with the individual on trial as to make their testimony not wholly safe and reliable. The physicians of jails rarely see such cases, and often feel incompetent to decide where there is any considerable difficulty.

If in connection with our large institutions some such strong rooms could be provided, and the medical officers of the institution be instructed to examine them frequently, and carefully, under all circumstances, and for a considerable period, the results might be more satisfactory and more safely relied upon, than they can be under the present system.

At some time, not far distant, I hope, a suit of rooms for the violent insane of both sexes may be erected, at a suitable distance from our Hospital building, in which a few such apartments may be provided, with others to take the place of our present solitary rooms, which are so near as to annoy the better class of patients, and so constructed as to be neither pleasant, comfortable, or healthful.

The subject of the jurisprudence of insanity is deeply interesting, and is claiming increased attention from year to year from the lawyer, the judge, and the medical man. The practice of our courts, and those of English judicature, is quite in advance of the principles laid down in their books. But the latter will make steady progress till more just views prevail, and criminal law be modified by the enlightened experience of modern science and observation.

#### TABLE 3.

Showing the number of Discharges and Deaths, and the condition of those who have left the Hospital, from Dec. 1st, 1843, to Nov. 30th, 1844.

	No. of each Sex.	Recovered.	Improved.	Incurable & Harnless.	Incurable & Dangerous.	Died.	Total.
Patients discharged, . 228  Males,  Females,	117 111	56 68	19 21	29 16	4 0	9	117
Patients discharged whose insanity was of less duration than one year, 100	228	124	40	45	4	15	228
Males, Females,	41 59	37 56	3 1	0	0	1 2	41 59
Patients discharged whose insanity was of longer duration than one year, 128	100	93	4	0	0	3	100
Males, Females,	76 52	19 12	16 20	29 16	$\frac{4}{0}$	8	76 52
•	128	31	36	45	4	12	128

### Facts relating to discharges.

Discharged as	harmless	and incu	rable,	mostly	for want	of room;	in	
twelve y	vears, -	-	-	-	•	-	•	216
Sent to the jails	s as incura	ble and d	angero	ous, -	-	•	-	40
Discharged by	the Probat	e Court,	-	-	-	-	-	35
66 66	" higher	Courts,	-	No	-	-	-	9
Sent to South ?	Boston, -		-	_	-	ne ne	-	17

It will be seen by the table that, in the course of the past year, forty patients were removed from the Hospital improved, but not recovered, forty-five as incurable and harmless, and four as incurable and dangerous. That in the course of the last year, eighty-nine left the Hospital, most of whom ought to have been retained, and almost as many were denied admission for want of room. Nothing can show more clearly

that the additional accommodations, now in progress, are necessary to supply the wants of the community.

There are already enough patients in the Hospital, waiting for these accommodations to be in readiness, and more than can now be well provided for, to fill one quarter of the additional apartments.

In twelve years nearly three hundred patients have been sent away from the Hospital, who ought to have been retained. A large proportion of these individuals are now living, some in jails, some in cages and dungeons, and many in poorhouses, in a miserable condition, not so much from a disposition to neglect them as from the difficulty of taking care of them in places so illy provided with suitable means.

TABLE 4.

Showing the number of Admissions and Discharges, and the average number of Patients each month in the year.

,		Admissions.	Discharges.					
December, January, February, March, April, May, June, July, August, September, October, November		-	-		262 261 258 255 260 263 258 259 265 265 262 261	2-3 1-2 1-2 1-2 1-6 1-2	20 19 12 15 27 18 20 19 32 20 21 13	10 24 14 17 19 25 21 17 26 24 15
Year	ly A	Lverage,	-	-	261		236	228

TABLE 5.

Showing the number of Residents, the average number of Patients, the number at the end of each year, and the Expense of each year, for the twelve years that the Hospital has been in operation.

The Year.	No. of Residents.	Average No.	No. at the end of the year.	Annual Expense.
1833	153	107	114	\$ 12,272 91
1834	233	117	118	15,840 27
1835	241	120	119	16,576 44
1836	245	127	138	21,395 28
1837	306	163	185	26,027 07
1838	362	211	218	28,739 40
1839	397	223	229	29,474 41
1840	391	229	236	27,844 98
1841	399	233	232	28,847 62
1842	430	238	238	27,546 87
1843	458	244	255	27,914 12
1844	491	261	263	29,278 75

The accommodations of the Hospital will be for about 400 patients, and it has been erected at an expense of about \$150,000, which is not far from \$375 for each patient. I have estimated that the new wings would be erected for about \$300 to an individual, perhaps something less.

The cost of some of the English institutions is given in the report of the Metropolitan Commissioners, recently published by order of the government. The Wakefield Asylum cost £111 for each person; the Gloucester £357. Most of the English institutions cost about £200 for each individual. The Bedford Asylum cost £20,000, and will accommodate 200 patients, which is about \$500 for each individual. The Asylum at Kent cost £64,000, will accommodate 300 patients, which is more than \$1000 each. The Hanwell Asylum, for 1000 patients, cost £196,000, which is nearly \$1000 for each patient.

The English Commissioners, very justly in my opinion, discountenance low prices. They sanction no houses where the charge is less than 8 shillings a week, or about \$2 00 of our currency, and they are better pleased with those which charge 9 or 10 shillings a week, which is from \$2 25 to \$2 50, about the customary charge of the New England public Hospitals.

There is doubtless some danger of getting prices too low, though the

motive with those who strive to reduce them is unquestionably good. If the cost of living should increase, it would be difficult to raise the price, and there is danger, in such circumstances, of cheapening the living to poor-house fare, lest the cost of support should exceed the income. I think it much better to keep up the price to the average charge at the American Hospitals, and increase the comforts and benefits that a liberal price will allow, rather than reduce it to the minimum rate and endanger neglect and too cheap a diet.

TABLE 6. Statistics of the Hospital, from Jan. 1833, to Nov. 30th, 1844.

							4,0					
	1833.	1834.	1835.	1836.	1837.	1838.	1839.	1840.	1841	1842.	1843	1844.
Whole No. of Patients admitted, -	153	119	113	125	168	177	179	162	163	198	270	236
Discharged, including deaths and elopements,	39	115	112	106	121	144	168	155	167	191	203	228
Discharged recov'd,	25	64	52	58	69	76	80	82	82	88	116	124
Discharged impro'd,	7	22	23	17	23	24	29	29	36	25	32	40
Discharged not improved,	. 2	20	28	22	20	28	37	29	37	66	33	49
Died,	4	8	8	8	9	16	22	15	12	12	22	15
Eloped,	1	1	1	1	0	0	0	0	0	0	0	0
Patients in the Hospital in the course of the year,	153	233	241	245	306	362	397	391	399	430	458	491
Patients remaining at the end of the year,	114	118	119	138	185	218	229	236	232	238	255	263
Males admitted,	96	68	51	66	94	96	80	75	73	107	111	109
Females admitted, -	57	51	62	59	74	81	99	87	90	91	109	127
Males discharged, -	19	58	57	56	65	74	66	59	71	96	92	108
Females discharged,	15	48	46	41	47	54	30	81	84	83	89	105
Males died, -	3	5	4	6	6	10	14	9	7	3	8	. 9
Females died, -	1	3	4	2	3	6	8	6	5	9	14	6
Patients sent by Courts, Private,	109 44	55 64	90 23	117 8	129 39	123 54	123 56	106 56	110 53	157 41	152 68	158 78
Recoveries: Males, Females, -	13 12	33 31	27 25	32 26	37 32	45 31	32 48	28 54	37 45	44 44	53 63	56 68
Average,	107	117	120	127	163	211	223	229	233	238	244	261

TABLE 7.
Statistics of the different Seasons.

Call the same of the control of the	Orași de la compania		To-Cares		Name of the Owner	and the second	Company of the Compan		See Add to the	en ensolet		
	1000	1004	1005	1000	- 0 0 W	1000		1040	7047	1040	1049	7044
A 7	1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Admissions—			<del></del>									
In Winter,	27	26		23	ł	1	39	32	31	50		51
In Spring,	72	35		36	49	46	38	42	37	48		60
In Summer,	23			42	40	47	59	44	51	40	56	1
In Autumn,	31	28	28	24	53	38	43	44	44	60	55	54
Discharges—												
In Winter,	0	22	21	20	14	18	31	29	35	37	44	48
In Spring,	1	33	30	33	36	37	38	38	33	46	49	60
In Summer,	11	28	31	24	29	44	48	41	37	46	46	65
In Autumn,	23	24	22	21	33	29	29	32	50	50	42	55
,											1	
Recoveries-	1											
In Winter,	. 0	13	13	12	10	15	13	18	20	24	24	31
In Spring,	0	20		15	1			$\frac{1}{22}$	10			
In Summer,	9	16						20				1
In Autumn,	16	15				1			1	1		1
in matumin,	10	10	12	10	21	20	20		30	10	20	
Deaths-							1					
In Winter,	0	3	1	0	1	3	5	6	1	4	5	2
In Spring,	1	$\frac{3}{2}$	$\frac{1}{2}$	1	2	5		6	2	1	3	
In Suraneau	3		$\frac{z}{2}$	_	1	5	-	1	5	3		4
In Summer,	0	)		4 3			1	1	_			I.
In Autumn,	0	0	3	3	5	3	5	2	4	4	8	4

TABLE 8.

Ages of Patients in	the Hos	pital, Dec	ember	Duration of Insanity with those remaining, December 1st, 1844.	
Under 20, - From 20 to 25, '' 25 to 30, '' 30 to 35, '' 35 to 40, '' 40 to 45, '' 45 to 50, '' 50 to 55, '' 55 to 60, '' 60 to 65			9 23 28 37 39 24 34 26 10	From 1 to 2 years,  "2 to 5 "-  "5 to 10 "-  "10 to 15 "-  "15 to 20 "-  "20 to 25 "-  "25 to 30 "-  Over 30 years, -	51 14 70 45 28 21 7
" 60 to 65, " 65 to 70, " 70 to 75, " 75 to 80, Over 80,	-		16 8 6 1 2 —————————————————————————————————	Unknown, 2	63

TABLE 9.

Classification of Insanity.

Transfer for the same of the same						
		-	Whole No.	No. of each Sex.	Curable.	Total of Curable.
Mania, Males, Females,			999	540 459	350 323	673
Melancholia, Males, Females,	-	o dia	702	310 392	168 250	418
Dementia, Males, Females,			225	139 86	4 4	8
Idiots, Males, Females,	9		12	10 2		

The various forms of insanity continue to appear in about the usual proportions. Violent insanity, assuming the form of mania, is the most common of any in this institution, designed principally for those "furiously mad and dangerous to be at large." The homicidal and the suicidal, often of the melancholy class, are of course the most dangerous of all. Our class of demented patients has been numerous; they are generally imbecile, though sometimes impulsive and dangerous. Idiots can hardly ever be violent, and are, of course, rarely committed to this institution. These two classes of unfortunate beings are exciting unusual interest among the philanthropists of modern times.

In 1828, a school for the instruction of idiotic male patients was established in Paris in connection with the Bicetre, and the plan has been extended by M. Leuret and Voisir. A similar school was established at the Salpetriere for females, in 1831, by M. Falret. At the Lancaster Lunatic Asylum, and at the Hanwell Asylum in England, efforts are now making, on the same benevolent plan, to resuscitate minds impaired by disease, and to develop the mental powers of the congenital idiot to a considerable degree of usefulness. A similar effort has been made in a few of the institutions in this country, in all, it is said,

with unexpected success. I have no doubt that such cases have too often been despaired of when patient continuance in effort might have been followed by favorable results. Such cases are not necessarily hopeless. The brain, after severe disease, may be left in an inactive state when no organic lesion has taken place to fatally impair its functions.

Many cases of palsy are followed by the loss of memory of names of persons, things, and even language, which, though in old age, have been learned anew more or less perfectly, so at last, as to be quite useful again. Some individuals of this description have a sort of double consciousness, the condition of knowledge, alternating after successive attacks of disease. May there not be even greater probability of restoring an intellect prostrated by insanity in early life, where none of the faculties are wholly lost, though all are weakened and debilitated?

I am not informed what process of education has been adopted with these unfortunate persons. The first object undoubtedly is to fix the attention and excite interest. If the same means should be adopted which the patient mother uses to develop the mental powers of her infant, with the same sweetness of temper, patient trial and persevering effort, I have no doubt much might be accomplished. If attention can be excited, I have but little doubt that the object can be effected. It may require tenfold more perseverance and patience than it does to educate an active child, but what is this to the blank, the utter darkness in which the intellect and moral sensibilities of the idiot are enveloped, if by these means it can be removed. Could a mother be persuaded that her idiot child could be taught to know and understand, even if imperfectly, its powers, capacity and destiny, if she could, by a life of effort, teach it to read and understand the great moral truths without which its mind must be a blank, how willingly would she devote herself, day and night, watchfully and prayerfully, to give it such instruction as would increase its usefulness and add to its enjoyment.

#### INFANTILE INSANITY.

There is another class of unfortunate individuals, far more numerous than I had formerly supposed, and much more interesting than idiots,—I refer to Insane Children.

Since I have been connected with this Hospital, I have been consulted in a number of cases of this description. These little patients have intelligent faces, well formed bodies, good developments of the head,

and active minds. Their movements are free, easy and graceful, many of them are sprightly, even handsome; they are generally restless, irritable and extremely mischievous, and are rarely able to speak. In some cases, as soon as there is any mental development, the peculiar characteristics begin to appear, without any known cause. In other cases, epileptic fits have preceded these peculiarities. In one case the use of instruments in labor was supposed to be the cause; epileptic convulsions probably sometimes arise from difficult parturition.

No person familiar with these cases would be likely to mistake them for idiots; they look differently, walk differently, and have different developments of body and mind.

Some of these children have been benefitted by medical treatment. One, at the present time under my care for epilepsy, seems to be improving favorably. My attention has recently been particularly directed to this subject as I have been, within a few days, consulted in three different cases, of which the epileptic child, above named, was one. I have strong hope that some of them may be cured, and then instructed. Like other insane persons, there is difficulty in fixing the attention, they move with great rapidity from one thing to another, and are impatient of restraint.

In some such persons particular faculties seem much more active than others. One lad, in whose case I was consulted, was not able to articulate, and of course had never learned to read, but was observing of many things, particularly of mechanical operations, drawing, &c. He has left many traces of his skill on the buildings and fences of his former residence, which are yet to be seen. He has now arrived at manhood, but I have no knowledge of his present condition or of his progress in improvement for the last few years. When a lad, he was extremely mischievous, but sprightly and interesting.

Within a few days I have seen a very interesting case of this description, a girl twelve years old, who has a well formed head, an intelligent and handsome face, a bright black eye, and easy and graceful manners. She is respectful and obedient in her conduct, gentle and affectionate in her temper and disposition, and usually quiet and unobtrusive, but is easily excited, impatient when urged to do any thing disagreeable to her, and if opposed utters a scream, but cannot articulate. She constantly hurries from one thing to another, and, like the insane, wants a safety valve to let off her excitement. She is excessively fond of music, would listen with apparent delight to the tones of a piano, seem-

ed to have an irresistible desire to perform herself, and would strike the keys with eagerness and great satisfaction. In her visit to me she would seize the bellows which hung in the room, and blow them with great effort and apparent delight. She is perpetually active, but is far less mischievous than formerly. She has very little power of attention, and has, as yet, never been taught. I have referred the case to my friend, Dr. Howe, whose great success in a case apparently far more forbidding, is universally known, and I am happy to say he is interested in it, and I have no doubt will find his active benevolence excited when he shall see her.

A child two years old was lately brought to me at the request of the family physician, who had consulted me respecting it. It is unable to sit, to use its limbs, or talk, its face is intelligent, by no means idiotic. It has powers of mimicry unequalled by any child of its age I have ever met with. Having understood that it would imitate its father in whatever motions he made, I tried some experiments with it, and was astonished and amused to find it copy my movements so exactly, and that too, with the most roguish expression conceivable, apparently much delighted.

I have now the case formerly alluded to under my care for epilepsy, which, for some months, has been severe and of frequent recurrence. This child has an intelligent face, and a good developement of the head, except that it is small. Its form is graceful, and its movements easy and natural. Since it commenced the use of remedies, it has been more quiet and tranquil, less mischievous, sleeps better, has fewer fits, and they are less severe. If the epilepsy can be cured in this case, and I think it may be, I shall have great confidence that, under the care of its excellent mother, it may be taught to articulate, and finally be educated. Indeed since I have seen this interesting child some effort has been made to teach it to talk, and with some little success.

What has struck me as particularly worthy of remark in all these cases is that while some of the faculties of the mind are active and many of them capable of improvement, others are torpid or perverted, bearing, in this particular, much resemblance to certain cases of insanity.

I have been consulted quite recently in a case of insanity which commenced in infancy, and has continued in some degree to this time, now twenty years.

When an infant, this young man had epileptic fits, these did not con-

tinue long, and the child was apparently healthy, sprightly, and intelligent, till eight years of age or upward, and learnt as well as other children. He then became affected with false vision, saw spiders, and other vermin, crawling over him and all about him, and particularly in his food, so that it was with difficulty that he could be prevailed on to eat. This delusion continued for some time. At that time, now ten or twelve years, I was consulted in the case, and prescribed some remedies. The delusion left him after a while, and he has since been in most respects better, is able to work, but not to learn much, although his mind seems not to be particularly inactive. He is talkative and inquisitive in an unusual degree, asks childish questions, but is inattentive to the answers, and not profited by the information which he obtains. He is able to read and write some, but has not been able to acquire much knowledge. The present winter, he has attempted to acquire some additional learning; commenced going to school and gave his attention to arithmetic, he made but little progress, and soon began to complain of his head, and confusion of thought, finally ceased to speak, because he says he could not speak right. For five or six weeks he has been almost constantly mute, speaking only occasionally. Since that time he has twice run away from his home, and wandered he knew not where, was lost and confused in his mind.

When he returned home the first time, he was greatly rejoiced to see his friends, and to get back again. When found the second time, he was brought to me, to be placed under my care, his vision is not now disturbed, he does not talk because he is not satisfied with what he says, and he is tired of life. A few days since he purchased a pistol to take his own life, but it was taken from him before he made any attempts. He is a stout, hale, full grown young man, his head is of good size and well formed, his motions easy and graceful, his speech natural. He eats rather sparingly, is anxious to get well, and willing to adopt any means recommended for his cure.

The subject of educating demented persons is new, it is at present exciting much attention, and the results are looked for with deep interest. The brain, in such cases may not be affected with organic changes, but only be in an extremely torpid or inactive state. Some such cases, after a long torpor in which all hope of recovery has been lost, have spontaneously come out of apparently the most forlorn condition, and been restored to health and mental soundness. So the idiot and congenital insane may have a brain capable of greater or less improvement, if persevering efforts are made to excite it to activity.

If one old case of insanity in ten can be restored to soundness of mind by the appliances of insane hospitals, should not all of this class have the benefits of such a trial? In a large proportion of these cases the physical health can be improved, perverted habits can be changed, and the mind be made to enjoy, in some degree, what it has been deprived of under the influence of long continued and neglected disease. So if one idiotic or demented person can have his powers of mindrendered active by effort, and some degree of knowledge imparted to him by which his enjoyment and usefulness can be increased, even if ten fail of improvement, it will be worth the effort in all. But the case is more favorable than this supposition allows. I have no doubt that nearly all can be improved physically and mentally, and that the experiment will be productive of much good. It is certainly worthy of the consideration of the Christian and the philanthropist.

TABLE 10.

Showing the Causes of Insanity and circumstances connected with causes and predisposition to Insanity.

Intemperance, -	-	260	Jealousy,	6
Ill health,	-	318	Fright,	13
Masturbation, -	-	139	Palsy,	16
Domestic Afflictions,	-	203	Hereditary, or having insane	
Religious,	-	173	ancestors or kindred, -	525
Property,	-	107	Periodical,	381
Disappointed Affection,	-	63	Homicidal,	22
Disappointed Ambition,		33	Have committed Homicide,	16
Epilepsy,	-	49	Suicidal,	213
Puerperal, -	-	56	Have committed Suicide, -	10
Wounds of the Head,	-	23	Arising from physical causes,	807
Abuse of Snuff and Toba	cco,	9	Arising from moral causes,	604

Many not classed.

The number of cases of insanity from intemperance is less than formerly, and has sensibly diminished for three or four years. There have been two cases of delirium tremens in the Hospital the last year, both of which recovered favorably: this is probably more than the average for the last five years. It is reasonable to hope that the many influences now in successful progress, to remove this great scourge from our land, are already felt in the diminution of insanity from this cause.

The secret vice, a cause nearly allied to intemperance, has also

fewer victims than formerly, which we may hope is caused by the information that has been diffused on the subject, and the warnings that have reached the young through the various channels of intelligence that have been opened on this hitherto obscene subject.

The number of cases from religious causes, continues to be large. The last year has been as prolific of excitement on the subject as any of the past years. Millerism has had as many victims as in any former year, and though its prophets have so frequently proved false, the delusion continues to agitate the community to a most remarkable extent. The repeated failure of the calculations on which this final consummation is made to depend, would be sufficient, it would seem, to satisfy the honest, but misguided votary of the ignorance of his false guides of the true basis of their estimate, even if he still retains confidence in their integrity and good intentions. The delusion is one greatly calculated to disturb the excitable, and it is not surprising that many have become insane under its influence.

By the table it will appear that a large number of the insane have insane kindred nearly allied to them. My opinion, often expressed in former reports, respecting this predisposition to insanity, remains unchanged. It should never be recorded as a cause, but only as one of the influences connected with the condition of the individual, which increases his liability to an attack of insanity. It always requires another, and often more than one cause, to induce insanity even where this predisposition exists ever so strongly. This constitutional tendency may be increased, and perhaps be developed by causes to which the system is subjected. Ancestors of a highly nervous temperament may have descendants that are insane, and the insane may have offspring of highly nervous temperaments who are never insane. These changes are constantly taking place in families, the results of intermarriage of individuals of different temperaments, as well as from a multitude of other causes. A predisposition of this character frequently ceases to operate on one or two generations and then subsequently appears, often excited by influences not understood, but which might be discovered by diligent inquiry. This is a subject of vast interest to society, and may at some future time be so carefully studied, and so well understood, as to make a marked difference in the predisposition of families to dangerous and fatal disease.

From careful study of the laws of life, we may derive much benefit in the early training of individuals who, at its very outset, exhibit ten-

dencies to the development of predisposition to disease which, when once established, it may be difficult to influence. Here should be founded the very basis of education, that from well formed bodies, and brains well developed, intellectual and moral powers may emanate such as will prove a safeguard from disease, and particularly from insanity.

The table shows a large number of periodical cases. This is an interesting form of insanity, and should be carefully studied by the jurist no less than the physician, for in connection with it comes the important inquiry, what is a lucid interval, and how far are the rights to be restored to an individual who has been insane, and how far responsibility rests upon such a person when his excitement has left him. In such cases there is generally a period of gloom and depression of spirits following high excitement, during which every thing appears as sombre and uninteresting as it does beautiful and cheering in the period of ex-In both these conditions there is a false estimate of things by which the mind is swayed and the feelings estranged. Though the conversation may not exhibit marked inconsistency or delusion during the season of depression, yet the influence of unnatural feelings is manifested in all the conduct, in the transactions of business, and in social intercourse. If a person has an annual period of excitement, even if it be of short duration, followed by marked depression, of longer or shorter continuance, the integrity of his mind should be suspected at all times, especially if he deviates in his conduct from the common exhibition of character, either in his mental or moral relations. Such a man should be estimated by comparing him now with his best condition of mind when not suspected of insanity, or any deviation from a sound and healthy state. If the lucid interval be of short duration, and the paroxysms of insanity near two, three, or four times a year, followed by longer or shorter periods of depression, it will never be safe to consider such an individual of sound mind. In all transactions of business, it should, in such cases, devolve on the opposite contracting party to show, in case of any subsequent dispute, that the man possessed a rational mind, uninfluenced by any traces of former disease.

If the lucid interval be of longer duration so that the paroxyms of insanity recur once in two or more years, and the healthy and rational appearance and conduct of the man be fully restored, he should, unhesitatingly, be considered of sound mind, and his civil rights and legal responsibilities should be restored to him.

Short intervals of apparent reason, with an insane man, should always be distrusted, as they can never be relied upon, though at the time there may be evidence of a clear and collected state of mind. I have known many instances of this kind in insanity and the delirium of fever, where the friends, and even medical gentlemen of high standing, supposed that the individual was conscious of what he was doing, and capable of transacting important business, when, after recovery, not a trace of recollection remained of any thing that occurred during this period.

When a man has for years been subject to periods of insanity, the brain being, for a longer or shorter time under the influence of disease, either of excitement or collapse, it can hardly be supposed that the mind will continue to return to an entirely healthy condition, even if it be able to solve common problems, it may be perplexed by those more difficult. Such a man may be able to perform common labor and transact common business, while in things of greater magnitude he would show indecision quite unnatural to him, and a want of that forecast and sound judgment that had formerly characterized his mind.

# TABLE 11.

# Occupation.

	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		1	
Farmers, -		_	238	Stevedores,	2
Laborers, -	-	-	157	Broom-makers, -	2
Merchants, -	_	_	78	Copper-smiths,	2
Shoemakers,	_	-	77	Watchmen,	2
Seamen, -	-	_	66	Drovers,	2
Carpenters,	_	_	53	Curriers,	2
Manufacturers,	_	-	35	Card-makers,	2
Teachers, -	-	_	28	Glass-blowers,	2
Students, -	-	-	27	Engineers,	2
Blacksmiths,	-	-	20	Tobacconists,	2
Printers, -	_	-	20	Weavers,	2
Tailors, -	-	_	13	Soldiers,	2
Machinists,	-	_	11	Umbrella-maker,	1
Coopers, -	-	~	11	Snath-maker,	1
Bricklayers,	-	-	10	Gilder,	1
Cabinet-makers,	-	•	10	Soap-maker,	1
Clothiers, -	-	-	8	Sheriff,	1
Clergymen,	-	-	8 7	Constable,	1
Painters, -	-	-		Turner,	1
Lawyers, -	-	~	6	News-collector,	1
Physicians,	-	-	6	Broker,	1
Sail-makers,	-	-	6	Hatter,	1
Millers, -	-	-	5	Gardener,	1
Bakers, -	-		5	Mat-maker,	1
Rope-makers,	-	-	5	Stocking-weaver,	1
Jewellers, -	-	-	5	Bellows-maker,	1
Musicians, -	-	-	4	Pump-maker,	1
Pedlers, -	-	-	4	Chair-maker,	1
Paper-makers,	-	-	4	Auctioneer,	1
Harness-makers,	-	•	4	Miniature-painter,	1
Coachmen, -	-	_	4	Wheelwright,	1
Innkeepers,	-	-	4	Book-binder,	1
Barbers, -	-	-	4	Carriage-maker,	1
Turners, -	-	-	4 3 3	Females not accustomed to	
Calico-printers,	-	-	3	labor,	170
Tanners, -		-	3	Females accustomed to se-	
Comb-makers,	-	-	3 3 3	dentary employments, -	212
Butchers, -	-	-	3	Females accustomed to ac-	
Stone-cutters,	-	•		tive employments, -	355
Book-keepers,	-		3	Many not classed.	

TABLE 12.

Diseases which have proved fatal.

34	Dysenteric Fever	_	2
		_	2
1		_	3
		_	3
			2
		-	r
		-	1
1			1
1		-	I
		-	1
			1
	Disease of the Bladder,	-	1
3			
3			
- 1	Total,	-	151
2			
		Bronchitis, Typhus Fever, - Chronic Dysentery, Erysipelas, Old Age, Gastric Fever, - Land Scurvy, - Congestive Fever, - Concussion of the Brain, Disease of the Bladder,  Total,	15 Bronchitis, 15 Typhus Fever, 14 Chronic Dysentery, 10 Erysipelas, 10 Old Age, 5 Land Scurvy, 4 Congestive Fever, 4 Concussion of the Brain, - 4 Disease of the Bladder, - 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3

The number of deaths in the Hospital the past season, has not been great, and the patients have been unusually healthy. In the course of the autumn, typhus fever prevailed extensively in the vicinity, and three attendants and a number of patients were attacked with it. Some of the cases were mild, others severe, three were fatal.

The first death from this cause was a man aged 44, who had been demented for years, and insane since 1820. We discovered little change in him, except that he was thirsty, his tongue was furred, and his eye more heavy than usual. His illness continued but a few days and he died rather suddenly.

The second fatal case was an extremely slender woman, aged 42, who had been insane 23 years. Her attack was sudden and severe, the stomach was much disturbed, and the bowels affected with diarrhæa. She soon had apthæ and red tongue, her strength was much prostrated, and she appeared extremely sick, but had no symptoms that threatened immediate death. One morning she got up, as usual, and while sitting in her chair, appeared faint, and was placed upon the bed, she became purple all over, the heart struggled violently, and she died almost immediately.

The third fatal case was a man aged 76, who had been insane 36

years, nearly half his life; many years of which he had spent in solitude, in a dark and damp cage under ground. He had been in the Hospital nearly eight years, and was generally healthy. When excited he was extremely violent, when in his lucid interval, he was calm and civil, quite harmless and pleasant. His attack was sudden and severe, marked particularly by severe billious symptoms, excessive vomiting, great thirst, dry and red tongue, and extreme exhaustion.

In all these cases insanity had been of long duration, and they were hopeless of cure. In them all, particularly the first two, we saw repeated, what we have often witnessed, the sudden failure of the powers in an insane patient under severe acute disease.

On the evening of the 19th of May, Abner Rogers, Jr., whose assault and assassination of the lamented warden of the Massachusetts prison, and whose trial and escape from punishment, on the ground of insanity, made him extensively known in this vicinity, threw himself from the window of the great hall, while attending prayers, which produced such a seyere concussion as to result in his death in thirty-six hours.

The case of Rogers, as a case of insanity, was very interesting. He had been a bad man, spent his life in courses of crime, and for many years was an inmate of a prison. At his trial it appeared that he had had strange turns, recurring at periods more or less regular, for some years before the homicide. In childhood he had epileptic fits, which showed the tendency to disease of the brain and nervous system. It was also proved that at sundry boarding places he had had turns of excitement, of appearing strange, and of forgetfulness, which usually passed off in a few days and left him in his usual state of health. His temperament was truly nervous, and his imprudence and irregularities had increased the predisposition to excitement and impulse, to which he was constitutionally prone.

Some days before the homicide, he had one of these excitements, was extremely irritable, apprehensive and suspicious; his nights were sleepless, disturbed by threats from imaginary voices which produced a suspicion that the Warden was intending to inflict some severe punishment upon him. In the day time, while in the shop, he was extremely uneasy, passing repeatedly from his seat to the desk of the Overseer, and importuning him in the most imploring manner, to intercede with the Warden and prevent the punishment. Yet no punishment awaited him, he imagined all that so distressed and perplexed him. It can hardly

be doubted that false hearing was at the bottom of all the difficulty in the case.

It was in this condition of mind, harrassed and perplexed by voices threatening with punishment the most cruel and unjust, that the impulse was excited to assault the Warden and give him the fatal thrust. For some days this state of mind continued, but soon yielded as on former and subsequent occasions, to calmness and self-control.

When Rogers came to the Hospital, about the first of February, he had a slight paroxysm of this excitement, in which his pulse was frequent, his tongue furred, his eyes red and excited, his appetite bad, and he was restless and sleepless. After a few days he was better, but on the 30th of March had a return of similar symptoms, with head-ache and vertigo. This also passed by in a few days, and he continued his work regularly till the 14th or 15th of May following, when these symptoms recurred in an aggravated form. He was greatly excited in manner, had head ache, vertigo, furred tongue, loss of sleep, loss of appetite, and bad taste in the mouth, which he attributed to bad food. He told an associate at this time that the food which was offered him was a corpse, he knew by the smell. He was irritable, suspicious, and afraid to take his food, apprehending that it was the intention of those around to poison him. He could not sleep, and dared not, if he could, lest the opportunity should be improved to take his life. During this time his countenance was haggard and anxious, and his eye, under such circumstances, was the most piercing and the most insane, expressing the strongest jealousy working within. I have, for years, been in the habit of contemplating the countenances of insane men and watching the indications of the insane eye, but I have never, in all my experience, seen an eye so indicative of the workings of the mind as was that of this man.

On the evening of the fatal leap, he requested to attend prayers with his associates, and as he had been more calm that day, it was thought safe for him to attend. He had before uniformly conducted with the utmost propriety on such occasions, and was gratified for the privilege of attending; so he now seemed. Towards the close of the service he became greatly excited, appeared agitated and alarmed, and requested to leave the room. He was watched with the greatest anxiety, by the officers present, who discovered his perturbation, and this probably increased his apprehensions of danger. He declared to one near him that the room was full of dead bodies. As quick as thought he stepped upon the seat and made the fatal plunge,—it seemed like magic to those

who were around him—his attendant sprung to seize him, but could not reach him,—not a dozen persons knew what had happened—most of the audience supposed that a gun was fired into the room,—the excitement was tremendous, but soon subsided and all was quiet. The deluded man was found in a state of insensibility from which he did not recover; he died in thirty-six hours.

The last tragic scene of this man's life tended greatly to settle the public mind respecting his insanity. Before this there had been such a mixture of strange and rational conduct, so much self-possession in the *lucid interval*, and so much of the appearance of passion, jealousy and malevolence in his excitement, that many individuals could not see why he was not wholly a bad man, not insane, but responsible as other men for his conduct. This last scene cannot be explained on any rational view of the case, he acted from impulse only, regardless of consequences.

## TABLE 13.

Showing the comparative Expense of supporting old and recent Cases of Insanity, from which we learn the economy of placing patients in Institutions in the early periods of Disease.

No. of the Old Cases.	$rac{ ext{Present}}{ ext{Age.}}$	Time Insane.	Estimate expense at \$100 a year before entering the Hospital, and varying from \$120 to \$132 since.	No. of the recent cases discharged.	Present Age.	Time Insane.	Cost of support at \$2 25 per week.						
2	70	29 years.	\$3332 00	1649	22	14 weeks.	\$31 50						
7	49	18 "	2124 00	1694	60	7 66	15 75						
8	61	22 "	2624 00	1695	38	13 "	29 25						
12	48	26 "	3018 00	1696	36	18 "	40 50						
18	$\overline{7}2$	34 "	3918 00	1700	40	6 "	13 50						
19	60	19 "	2324 00	1702	30	12 "	27 00						
$\overline{21}$	40	17 "	2113 00	1706	33	18 "	40 50						
44	57	26 "	3002 00	1708	22	11 ""	24. 75						
45	61	26 "	2955 00	1709	31	9 "	20 25						
102	54	26 "	2955 00	1716	26	16 "	36 00						
133	45	14 "	1551 00	1718	34	26 "	58 50						
209	40	17 "	2084 00	1719	38	19 "	42 75						
223	51	21 "	2484 00	1723	64	31 "	69 75						
260	48	17 "	2232 00	1724	42	6 "	13 50						
278	50	11 "	1544 00	1728	23	16 "	36 00						
319	54	10 "	1367 00	1735	28	17 "	38 25						
347	59	15 "	1764 00	1737	24	20 "	45 00						
367	41	13 "	1564 00	1739	40	16 "	36 00						
400	44	15 "	1764 00	1740	18	16 "	36 00						
425	49	14 "	2232 00	1743	36	30 "	67 50						
431	37	14 "	1532 00	1747	25	23 "	51 75						
435	56	16 "	1832 00	1748	32	30 "	67 50						
488	37	18 "	2032 00	1749	35	21 "	47 25						
532	70	14 "	1632 00	1750	21	15 "	33 75						
		452 years.	\$53,979 00			410 weeks.	\$922 50						
Ay W													

TABLE 14.

Showing the duration of Insanity, the ages and civil state of Patients in the Hospital, admitted last year and previous years.

	1833	1834	1835	1836	1837	1838	1839	1 40	1841	1842	1843	1814
Duration before ad-												
mission:												
Less than 1 year,	41	56	48	54	72	82	84	75	81	106	129	127
From 1 to 5 years,	27	29	37	37	58	50	63	56	52	58	62	
" 5 to 10 "	27	14	15	13	14	16	18	15	12	13	15	12
" 10 to 20 "	31	6	5	11	14	8	10	10	10	5	7	10
" 20 to 30 "	12	4	0	2	4	7	1	3	- 4	5	1	5
" 30 to 40 "	3	2	1	2	1	1	1	2	0	4	î	3
Unknown,	12	8	7	6	5	13	$\frac{1}{2}$	1	4	7	5	11
	170						~					
	153	119	113	125	168	177	179	162	163	198	220	236
Duration with those	100	11.0	210	1.00			1,0	102	100	100		~170
remaining at the												
end of each year:												
Less than 1 year,	26	22	21	11	29	28	34	28	32	40	45	51
From 1 to 5 years,	23	25	22	39	51	65	69	75	74	1		84
" 5 to 10 "	$\frac{20}{20}$	24		35	38	44	$\frac{00}{44}$	52	53			45
" 10 to 20 "	28	24	29	35	41	41	52		45	1	52	
" 20 to 30 "	7	5	3	7	11	18	14	13	15			-
" 30 to 40 "	2	2	4	2	2	3	4	5	4	l .	4	14
Unknown,	8	16	6	9	13	<b>1</b> 9	12		9	1		
Olikhown,	0	10		3	10		12	ТТ	9	10		19
	114	118	119	138	185	218	220	236	239	238	255	263
Ages of patients	114	110	110	100	100	210	AAU	2,00	202	200	200	203
when admitted:												
Under 20 years,	2	12	4	11	13	17	10	10	7	14	15	16
From 20 to 30 years,	34	31	23		58		47	46	50		48	
" 30 to 40 "	46	31	36	32			49					
" 40 to 50 "	35	31	28		31	32			31	46	39	
" 50 to 60 "	14	8	13	14	13	ł	I .	21	19			
" 60 to 70 "	17	5	6	13	1	8	14		9	12	11	_
" 70 to 80 "	3	0	3	0	12	$\frac{0}{2}$	8	5	1	2	5	17
_	2	1	0	0	0	$\tilde{0}$	0	0	1	1	2	$\frac{3}{2}$
Over 80 years,	2		0			U		U	1	1	2	2
	<b>15</b> 3	119	113	125	168	177	170	160	162	198	220	996
Civil atota of nationta	199	110	119	120	100	111	119	102	109	190	220	200
Civil state of patients when admitted:												
	00	71	52	68	94	101	90	ME	99	100	00	114
Single,	92	40	32 46	49	61	65	80	1	82			114
Married,	38		8	49	11	5	75	71	63			102
Widows,	12 11	4	7	$\frac{0}{2}$	2	6 6	17	12	13	12	17	
Widowers,	11	4	1	2	2	O		4	5	2	8	3
	153	119	113	125	168	177	170	169	162	198	220	936
	100	110	110	INU	100	111	1/3	102	100	100	NAU	200

TABLE 15.

Showing the comparative Curability of Insanity treated at different periods of Disease.

	Total of Cases.	Total of each Sex.	Cured or Curable.	Incurable.									
Of less duration than 1 year, Males, Females,	962	448 514	<b>3</b> 9 <b>7</b> 466	51 48									
From 1 to 2 years, Males, Females,	332	164 168	90 <b>10</b> 3	74 65									
From 2 to 5 years, Males, Females,	323	188 1 <b>35</b>	60 <b>51</b>	128 84									
From 5 to 10 years,  Males, Females,	186	102 84	13 12	89 <b>72</b>									
From 10 to 15 years, Males, Females,	105	55 50	4 3	51 47									
From 15 to 20 years, Males, Females,	39	26 13	1 0	25 13									
From 20 to 25 years, Males, Females,	28	15 13	0	15 13									
From 25 to 30 years, Males, Females,	10	8 2	0	8 <b>2</b>									
Over 30 years, Males, Females,	13	5 8	0	<b>5</b> 8									
	Some ur	known.											

TABLE 16.

Showing the comparative Curability of Insanity attacking at different Ages.

Total of Cases. Total of each Sex. Curable. In	
	curable.
Under 20, 332	
Males, 119 50	69
Females, 114 74	40
From 20 to 25, 291	40
Males, 160 84	76
Females, 131 89	42
From 25 to 30, 273	42
Males, 143 72	71
Females, 130 85	45
From 30 to 35, 279	40
Males, 150 82	68
Females, 129 85	44
From 35 to 40, 228	TT
Males, 98 53	45
Females, 130 85	45
From 40 to 45, 187	40
Males, 98 64	34
Females, 89 56	33
From 45 to 50, 145	99
Males, 68 47	21
Females, 77 61	16
From 50 to 55, - 127	10
Males, 56 37	19
Females, 71 52	19
From 55 to 60, 66	1.0
Males, 31 20	11
Females, 35 23	12
From 60 to 65, 57	LA
Males, 25 19	6
Females, 32 23	9
From 65 to 70, - · 30	J
Males, 21 14	7
Females, 9 7	2
From 70 to 75, 19	~
Males, 12 5	7
Females, 7	0
Over 75, 14	U
Males, 6 3	3
Females, 8 2	6

TABLE 17.
Showing the relation of Cause to Recovery.

PHYSICAL CAUSES.	Whole Number.	No. of each Sex.	Curable.	Incurable.								
Ill health, puerperal, followed fever, measles, wounds of the head, &c Males, Females,	405 - -	82 323	46 235	<b>36</b> 88								
Intemperance, Males, Females,	258 - -	231 27	125 14	106 13								
Masturbation and its results, debility, weakness, &c Males, Females,	142	128 14	35 1	93 13								
Epilepsy,	49	43 6	5 0	38 6								
Palsy,	33	24 9	4	20 8								
MORAL CAUSES.  Religious, including Mormonism, Millerism, Fanaticism, &c Males, Females,	177 - -	90 87	63 61	27 26								
Afflictions, trouble, love, fright, fear of death, future punishment, poverty, &c Males, Females, Cause	458 - - - unknown in m	185 273 any cases.	109 166	76 107								

TABLE 18.

Showing the causes of Insanity as affecting persons pursuing different Occupations.

OCCUPATI	ONS.		Intemperance.	Ill Health.	Masturbation.	Domestic Affliction.	Religious.	Property.	Disappointed Affection.	Disappointed Ambition.	Epilepsy.	Wounds on the Head.	Jealousy.	Fright.	Total.
Farmers, .	•		54	10	23	19	22	20	3	0	7	1	2	0	161
Shoemakers,	•	•	8	5	22	4	8	4	2	0	1	1	0	1	56
Laborers,	•	•	55	3	13	4	6	5	0	0	2	0	1	2	91
Seamen, .	•	-	25	1	5	2	5	6	0	0	0	0	2	0	46
Merchants,	•	•	11	2	27	2	4	13	0	0	1	0	0	1	61
Carpenters,	•		15	5	6	1	5	5	2	0	2	0	0	1	42
Blacksmiths,	•	•	4	1	1	0	1	2	2	0	0	0	0	0	11
Students,	•	•	0	2	17	2	2	0	0	0	1	0	0	0	24
Clergymen,	•	•	0	0	4	0	1	1	1	0	0	0	0	0	7
Lawyers,	•	•	2	0	2	1	0	1	0	0	0	0	0	0	6
Physicians,	•	•	2	0	0	0	0	1	1	0	0	0	0	0	4
Printers, .		٠	0	0	11	1	0	0	1	0	1	0	0	0	14
Manufacturers,	•	•	9	0	3	0	4	3	1	1	0	1	0	0	22
Barbers, .	•	•	0	1	0	0	1	0	0	0	0	0	0	0	2

This table continues to confirm the views expressed in former reports, that intemperance is the cause of insanity with those who pursue, active, rather than sedentary employments, and that those who pursue light and sedentary employments are more frequently the victims of the secret vice.

Of the 160 farmers,  $32\frac{1}{2}$  per cent. became insane by intemperance,  $14\frac{1}{2}$  per cent. by the secret vice,  $13\frac{3}{4}$  per cent. by religious influences, and  $12\frac{1}{2}$  per cent. by trouble respecting property.

Of 91 laborers, 60 per cent. are from intemperance, 14 per cent. from the secret vice,  $6\frac{1}{2}$  per cent. from religious influences, and  $5\frac{1}{2}$  per cent. from anxiety about property.

Of 46 seamen, 54 per cent. of the cases are from intemperance, 11 per cent. from the secret vice, 11 per cent. from religious influences, and 13 per cent. from trouble about property.

Of the 53 who pursue active mechanical trades, carpenters, blacksmiths, &c., 35 per cent. arise from intemperance, 13 from the secret vice, 11 from religious influences, and 13 from anxiety about property.

Of the 155 who pursue light and sedentary employments, including merchants, printers, students, and shoemakers, 12 per cent. arise from intemperance, 50 per cent. from the secret vice, 9 from religious influences, and 11 from anxiety about property.

Of 17 professional men who have been in the Hospital, 4 became insane by intemperance, 6 by the secret vice, 1 from religious influences, and 3 from anxiety about property.

### TABLE 19.

Showing the state of the Moon at the commencement of a paroxysm of excitement in 106 cases of Periodical Insanity, amounting in all to 789 paroxysms. Also the relation of the Moon to the 151 Deaths that have occurred in the Hospital.

Number of	PAROXYS	SMS EA	сн Да	Y•	Number (	OF DEATH	IS EACH	н Дау.	
Day of the Moon.	Whole No.	Male.	Female.	Day of the Quarter.	Day of the Moon.	Whole No.	Male.	Female.	Day of the Quarter.
1	20	12	8	1	1	1	1	0	1
	$\frac{20}{46}$	24	22	9	9	9	$\frac{1}{6}$	$\stackrel{\circ}{3}$	
2 3 4 5 6	28	$1\overline{4}$	$\tilde{14}$	2 3	2 3	11	5	6	2 3 4 5 6
4	31	14	17	4	4	5	3	$\overset{\circ}{2}$	4
$\hat{\tilde{s}}$	26	12	14	5	4 5	9	4	$\tilde{5}$	5
6	$\frac{30}{31}$	14	17	6	6	7	$\frac{1}{5}$	$\begin{bmatrix} 0 \\ 2 \end{bmatrix}$	6
7	42	21	21	7	7	8	1	7	7
End of 1st qr.	179	~1	Æ1		End of 1st qr.	O	-		•
8	38	20	18	1	8	6	3	3	1
9	27	$\tilde{16}$	11		9		$\begin{vmatrix} 0 \\ 2 \end{vmatrix}$	$\frac{3}{6}$	
10	18	7	11	$\frac{2}{3}$	10	$\frac{8}{3}$	$\begin{bmatrix} \tilde{3} \end{bmatrix}$	0	3
11	27	11	16	A	11	3	$\begin{array}{c c} & 3 \\ & 1 \end{array}$	$\stackrel{\circ}{2}$	2 3 4 5
12	27	16	11	4 5	12	4	$\begin{vmatrix} 1 \\ 2 \end{vmatrix}$	$\tilde{2}$	5
13	<b>26</b>	14	12	6	13	8	$\tilde{6}$	$\tilde{2}$	6
14	$\frac{20}{36}$	15	21	7	14	5	3	$\tilde{2}$	7
End of 2d qr.	90	10	<b>~</b> J.		End of 2d qr.	J	U	~	•
15	36	20	16	1	15	4	3	1	1
16	22	11	11		16	10	6	4	2
17	$\frac{\tilde{32}}{32}$	18	14	~ ?	17	6	$\begin{vmatrix} 0 \\ 3 \end{vmatrix}$	3	2 3
18	16	9	7	1	18	ő	0	0	1
19	23	15	8	2 3 4 5	19	$\overset{\circ}{2}$	$\begin{vmatrix} 0 \\ 1 \end{vmatrix}$	$\stackrel{\circ}{1}$	4 5
20	33	17	16	6	20	8	5	3	6
21	30	16	14	6 7	21	8 7	4	3	7
End of 3d qr.	90	10	1.2		End of 3d qr.		-	•	•
22	28	13	15	1	22	9	1	1	1
23	33	12	21	9	23	$\frac{2}{2}$	1	1	9
24	34	16	18	2	24	$\tilde{6}$	$\begin{vmatrix} 1 \\ 2 \end{vmatrix}$	4	~ ?
25 25	25	9	16	1 2 3 4 5 6 7	25	7	$\begin{vmatrix} \tilde{4} \end{vmatrix}$	3	$egin{array}{c} 2 \\ 3 \\ 4 \end{array}$
25 26	$\frac{23}{24}$	12	$\frac{10}{12}$	5	$\frac{25}{26}$	4	2	$\begin{bmatrix} 3 \\ 2 \end{bmatrix}$	5
20 27	13	4	9	6	27	0	$\begin{bmatrix} \tilde{0} \end{bmatrix}$	$\tilde{0}$	5 6 7
28	13 17	9	8	7	28	6	4	$\frac{0}{2}$	7
20	11	9	0		20		4	~	
Paroxysms,	789				Deaths,	151			

We have added to the records of the last year, on the subject of the moon, nine cases of periodical insanity and 61 paroxyms, in all 106 cases and 789 paroxysms. The facts accumulated on this subject have become so numerous that I am unwilling to discontinue the record, though nothing occurs to sustain the theories that have, for so long a time, been prevalent upon the subject.

The 15 deaths that have occurred in the Hospital the last year, arranged according to the theory of Dr. Allen, the champion of lunar influence in modern times, will show at the new and full moon 8 deaths, and at the quadratures 7 deaths, which is a trifle in favor of this theory.

There have now been 151 deaths in the Hospital; 74 of them have been at the time of the new and full moon, and 77 at the quadratures.

The whole number of paroxysms of excitement recorded in the table is 789; of these, 372 occurred at the new and full moon, which, according to Dr. Allen's views, is the period of increased excitement, and 417 at the quadratures, the period of diminished excitement. Thus we see that our observations do not confirm the plausible theory so fully sustained by Dr. Allen's tables.

It is useless to go over the subject more fully. My observations have no reference to any theory, as I have never adopted one. The first period of diurnal excitement, from 4 o'clock in the morning till 9, may have some countenance from facts, as I think at day light, and as light advances in the morning, the violently insane are liable to be excited. The same is true of bright moon-light nights, which I have always attributed to light only, and not to the period of the day, or the lunar period.

Some patients have morning and some evening excitements. I have no data to decide which are most numerous or most aggravated. It is quite as frequently the case that the violent insane are more excited after sleep, as that they are more quiet.

TABLE 20.

## Of Per Cent.

	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Recovery of cases of less than 1 year, - Recoveries of all dis-	82	82	84	89	86	90	91	. 91	91	88	93
charged, Recoveries of all	54	46	53	57	52	47	53	49	46	<b>5</b> 9	54
cases,	20	16	19	25	15	17	22	21	16	29	24

## Per Cent. of cases from the most prominent Causes each year.

		1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
Ill health, -	_	8	18	21	22	21	28	27	25	21	18	16	15
Religious, -	60%	9	6	7	7	6	9	5	4	4	9	13	9
The Affections,	-	14	12	17	16	16	15	25	17	13	15	9	10
Property, -	_	7	11	9	6	6	10	6	5	4	5	7	3
Intemperance,	-	25	24	23	15	10	16	8	12	12	8	6	8
Masturbation, -	-	5	6	7	16	21	6	8	7	6	4	3	2

## Per Cent of deaths of all in the Hospital each year.

1833	1834	1835	1836	1837	1838	1839	1840	1841	1842	1843	1844
21/2	31/2	31	$3\frac{1}{4}$	31	41/2	$5\frac{1}{2}$	334	3	$2\frac{3}{4}$	$4\frac{2}{3}$	3

Per cent of deaths of the whole number, 151 of 2013, - - - 72

Per cent. of deaths of the average number the last year, 15 of 261, - - 53

# Per Cent. of Recoveries compared with the admitted.

There have been in the Hospital 2013 patients, of whom 916 have recovered, which is - - - - - - - - - - - 45½ per cent.

There have been admitted to the Hospital the last year 236 patients, and there have recovered 124, which is - - - - - 52 per cent.

There have been admitted 127 cases of duration less than one year, of these 93 have recovered, which is - - - - - - - - 73 per cent.

The per cent. of recoveries of recent cases is very large in the American Institutions, which speaks well for the correctness of the moral and medical management. The treatment of the insane in all the American Hospitals is on the same principles and the appliances very nearly alike in each, Some depend upon medicine more than others, but when it is prescribed, it is nearly the same in all.

BLEEDING. All agree that depletion, by which I would be understood general bleeding and active cathartics, is not favorable in insanity, as it rarely affords more than temporary relief, and frequently produces marked injurious effects. When blood-letting has been employed freely and frequently in active mania, the only form of insanity in which it is commonly used to excess, if the excitement, for a short period, an hour or two, and sometimes a day or two, abates, it is generally renewed with increased violence, and under circumstances far less favorable for the benefit of other remedies. The indications for active depletion are usually the effect and not the cause of excitement, they grow out of the perpetual activity of the physical and mental powers, and are not the cause of it. By this course of remedies the strength and energy of the system is reduced, the nervous system is rendered more susceptible, and the actual violence of the symptoms is increased. The effect of great loss of blood is often to produce pain in the head, a sense of stricture, as if a fillet were tied around it tightly, ringing in the ears, and noises in the head which lead to false perceptions of sound, and illusions liable to result in permanent insanity. It is said that animals which are bled to death have congestion of blood in the vessels of the head; the last rush of blood seems to be to this citadel of life. It is a fact also that I have noticed for many years, that affections of the heart are produced by excessive loss of blood in any way. An eminent practitioner of medicine once informed me, that when he had bled cases of severe and painful neuralgia, he had repeatedly found palsy of the side affected with the disease on his next visit.

Free general bleeding is only useful in cases of entonic inflammation, such as pneumonia and phrenitis, with symptoms very unlike those attendant on insanity in any form.

CUPPING AND LEECHING. The effect of local bleeding is more favorable, and may sometimes procure relief from distressing symptoms and afford an abatement of excitement that may give other remedies a

better opportunity to produce good effects. But even local bleeding can rarely be relied upon to cure insanity. It is usually prescribed to procure present relief rather than with the expectation of permanent benefit. Where there is a redness of the eyes, great head-ache, and much heat and throbbing of the carotid and temporal arteries, it may not be amiss to use local depletion, while at the same time every effort should be made to promote the circulation of blood in the extremities, and the quantity of blood abstracted at one time should not be very great.

In some cases I have seen great excitement followed by a state of apparent dementia, almost immediately on free blood letting. Some time ago, a female, aged about 50, came under my care in the most violent mania. The remedies prescribed for her had but little effect, and it was resolved to bleed her freely. Sixteen or eighteen ounces of blood were taken from her arm, she became dull almost immediately, and remained so for a long time before she gained activity of mind, after which her excitement became as bad as ever and other remedies finally relieved her.

A vigorous, athletic man, aged 55, was subject to the most violent paroxysms of periodical insanity. He had been under my care repeatedly, and remedies had little effect in diminishing his excitement or abridging the length of his paroxysms. One day in the extreme of one of his excitements, he urged me to bleed him, and presented his arm for the purpose, held by the other hand so as to swell the veins to an inordinate size. I had him bled freely, principally to see what would be the effect of copious depletion in such a state of excitement. Within a few hours he seemed like an idiot, but the excitement was not essentially diminished. His mind was entirely chaotic for a number of days, the paroxysm was prolonged to an unusual extent, and its violence, on the whole, was not lessened.

Some years ago, a ship-master came under my care, who had been bled about sixteen ounces, from twenty to thirty times in the course of five or six weeks. He looked pale and bloodless, was tremulous and weak, but his excitement was not essentially abated. He afterwards recovered under different treatment, and has had no return of disease.

A patient is now under my care who was bled in the outset of disease, four or five pounds, at as many different times. His body appeared bloodless, and his mind chaotic in the extreme; he has become more quiet, but all our efforts have failed in removing his insanity.

Cathartics. Drastic purging is often even worse than bleeding. The effect of this remedy as a depletion, is probably less disastrous than blood-letting, but it produces other effects often very injurious. The digestive organs of the insane are peculiarly liable to disturbances. Dyspepsia, vomiting and costiveness or diarrhea, are often troublesome symptoms with them. Drastic cathartics generally aggravate these symptoms when they exist, and sometimes produce them when they do not. Costiveness is generally easily obviated by mild cathartics, it is far less troublesome than diarrhea, which is often obstinate, and too frequently a dangerous symptom when attendant on insanity. If the secretions of the liver are unhealthy or deficient, or if other conditions of the digestive organs require a change, the blue pill or small doses of calomel may be indicated. These remedies often produce very favorable impressions and prepare the system for others which may be needed to remove the symptoms of insanity itself.

In short, cathartics, as such, rarely do good in cases of insanity, but alterative remedies and laxatives are often necessary, and in many cases cannot be dispensed with. Tincture of Rhubarb and Senna with aromatics, Aloetics, Colocynth and Guaiacum are valuable remedies of this class.

I often combine compound extract of Colocynth with Ens veneris or Martial flowers, in torpid states of the intestinal canal with constipation. My favorite remedy in such cases, is the tincture or powder of Guaiacum. No remedy in my hands has a more favorable effect in those cases of melancholy attended by dyspepsia, costiveness, and gastric distress after taking food, than the aromatic tincture of Guaiacum prescribed so as to insure a laxative effect. It invigorates the stomach, acts favorably upon the bowels, proves diaphoretic, and, when necessary, emenagogue. It may be prescribed in doses of from one drachm three or four times a day, to half an ounce. Milk and sugar are altogether the best medicine in which it can be taken. The powder of Guaiacum is the better form of this remedy, if needed as a simple laxative, it rarely nauseates, and is useful in flatulency, giving tone to the whole alimentary canal, and effectively obviating constipation.

Oil of Croton in combination, given in minute doses, often proves favorable to remove costiveness. It is almost the only active purgative which can be prescribed favorably in small quantities. In combination with tonics, alteratives and narcotics, it can be used without swelling the bulk of the medicine, often in very small doses counteracting the constipating effects of other remedies.

Emetics. Emetics have never been extensively used in my practice with the insane. Many practitioners think well of their effects, and I have occasionally prescribed them to obviate particular symptoms, but have not seen much good from them to relieve the symptoms of insanity. In certain conditions of the stomach, they are indicated in this, as well as other diseases. Ipecacuanha and sulphate of zinc and copper are generally preferable to antimony. Antimony in small doses, combined with narcotics to determine to the surface and obviate their constipating effects, may be prescribed for a short time in the commencement of the disease, but is not useful when it has progressed for some time, especially when tonics and generous diet become necessary. Antimony in small doses often destroys appetite and relaxes the tone of the stomach and bowels, so as to retard the progress of recovery. patient requiring more tonics to restore strength to the system generally, and to the digestive organs particularly, than if it had not been used. It is not always a safe medicine, and generally does less good than it has credit for, yet I doubt not there are cases in which it may be useful.

NARCOTICS. By far the most useful remedies in active mania, after the system is prepared for their use, are narcotics.

It is generally conceded at the present day, that the condition of the brain in mania, is not inflammation, but rather a high state of irritation, increasing its activity and that of the nervous system generally. The symptoms are sometimes equivocal, and are calculated to mislead, but close observation and the effect of remedies conspire to show that the brain is not in a state of inflammation. For this state of the brain narcotics would seem to be the most natural remedies, and experience shows that such is the fact. In many cases, this state of excitement will, after a time, give place to more healthy and natural actions, and the disease will be cured without the use of remedies; but in a majority of cases the symptoms yield more readily and favorably where narcotics are prescribed.

Morphine. The remedies of this class most extensively useful are the Sulphate of Morphine and other similar preparations. The exact time, circumstances, and cases when these remedies can be applied with the greatest benefit, must depend upon the judgment and experience of the medical adviser. On this, doubtless, depends their greater utility in the hands of some men than of others, though many more cases, suitable for their use, may have fallen under the care of one

man than of others who have management of institutions. Other practitioners have generally but a limited experience with them, as insanity, at the present day, is but little treated by medicine except in the institutions especially devoted to this class of patients.

The Morphine should usually be administered in solution, beginning with greater or less doses, according to the nature of the case, and the urgency of the symptoms. Moderate doses should generally be first tried, and they may be cautiously enlarged till the system is under their influence, and the excitement is controlled. The effects should be carefully watched, and if any unpleasant or unfavorable symptoms occur, the remedy must be changed, modified or combined, so that these effects may be obviated. In a large majority of the cases no such effects will occur. When its effect is favorable, it exercises a controlling influence over the symptoms, and the patient becomes more quiet, rational and natural in every respect. These effects, once gained, can in most cases be maintained till the recovery is complete. Sometimes symptoms occur which require that the remedy be increased, but more generally it can be cautiously diminished, and after a time be withdrawn, and the system suffer no inconvenience, and the insanity proved to be cured. The time that this remedy should be used varies, in different cases, from a few weeks to many months.

In the few cases in which it is necessary to administer narcotics, in large doses to produce the most decided impressions, the tincture of opium is better than the salts, but generally the salts are more safe and agreeable in their effects.

In some cases, the Dover's powder is the best form in which this remedy can be administered, especially in the early periods of disease, when the skin is inclined to increased temperature and unnatural dryness.

For twelve years this remedy has been extensively used in this institution, with the most marked success.

The manner in which the Morphine has been used in this and other Hospitals in this country, continuing it till the symptoms have subsided, then omitting and seeing them return, then again and again removed by the renewal of the medicine, affords unequivocal evidence of its power to subdue maniacal excitements, relieve the delusions of the insane, and restore the brain and nervous system to a sound and healthy state.

Most English writers speak of the extraordinary effects of this remedy in isolated cases, but caution against its general use. But the

practitioners in the English institutions have learned, by experience, to rely upon it with as much confidence as those in this country have for a long time done.

I quote the following from the Report of the British Metropolitan Commissioners.

"Preparations of opium and other sedatives, given in repeated and sufficient doses, are thought by the best practitioners, who conduct the medical treatment in the LARGE ASYLUMS, to be of great efficacy, in subduing excitement and agitation, and, conjoined with the use of baths, cold applications to the head, and the use of antispasmodics and aperients are said to promote the cure of mania in the early and acute stages.

It is rare that any benefit arises from single doses of opiates at night to produce sleep, unless the system is kept under the influence of them the whole time. In the most violent forms of disease, the doses should be repeated once in four or six hours. The medicine failed to gain any permanent credit while it was only prescribed at night, in large doses, for the purpose of procuring sleep.

It is important to know, in this connection, the symptoms which contra indicate the use of this class of remedies. When the skin is hot and dry, the tongue covered with a white fur, or dry, smooth and red, the bowels obstinately constipated, the pupil of the eye greatly contracted, and the vessels of the conjunctiva injected with blood, the symptoms must be changed before the Morphine can be used with safety or advantage. With the dry, red, smooth tongue, which attends comparatively few cases, the use of opiates is generally unfavorable, but the other symptoms, above enumerated, can commonly be removed, or so far obviated, in a few days, as to make them unexceptionable.

I have spoken thus far only of the use of the Morphine in maniacal excitement. In some forms of melancholy, especially where there is great mental anguish, and strong suicidal propensity, its operation is equally beneficial, often procuring relief in a short time, and carrying the patient along most favorably to health. In this form of disease, it is rarely necessary to use the remedy in large doses, but whatever is prescribed should be at regular intervals, from three to six times in the twenty-four hours.

Datura Stramonium. Some practitioners place great reliance on the use of Stramonium in Mania. In some cases its effects are very favorable, in others it not only disappoints our hopes, but sometimes actually coincides with diseased impressions, and aggravates the symptoms. The late Dr. Todd used it successfully, and his testimony is a host in favor of any medicine. In my hands, in ordinary cases, it has not proved very successful.

In cases of insanity connected with epilepsy, and especially in epilepsy disconnected with insanity, I have seen most excellent effects from this remedy. It is rare that a case of insanity complicated with epilepsy, entirely recovers, but under the use of stramonium the symptoms of both are often greatly diminished in force and frequency. In many cases in which the paroxysms of epilepsy have recurred frequently, they have, for months, been wholly suspended by the use of the tincture of stramonium.

I have now in my care a young woman who had for some years been subject to epileptic paroxysms, three or four times a week for the last two years, she has had turns of violent mania, with the most determined purpose to commit suicide. At each recurrence, she would beat her head against the wall of her room, if otherwise restrained, so forcibly as to inflict severe wounds. She was put upon the use of Stramonium soon after she came to the Hospital; after a considerable time the severity of the paroxysms abated, and the insanity was less violent. It is now more than ten months since she has had an epileptic fit or a severe paroxysm of insanity. Her health has improved in every respect; she is more or less insane at all times, but is not violent. Instead of being one of the most troublesome patients in the house, she is quiet, harmless, and even useful, as she is industrious, and capable of doing much profitable labor. The Stramonium is still used in such doses as slightly to impair the vision.

This remedy rarely makes any favorable impression on epilepsy unless it be used in sufficient doses to dilate the pupils of the eye slightly, and produce some difficulty of vision more or less of the time.

In cases of insanity in which the condition of the brain is similar to that which exists in epilepsy, the Stramonium would doubtless do good, but to be able to distinguish these cases, requires discrimination and experience which few men possess.

The best form of administering the Stramonium is in tincture of the seeds, or tincture of the extract.

CONIUM MACULATUM. The extract of Conium, either alone or in combination with mineral tonics, is a valuable remedy, and has proved useful in some forms of insanity. As a means of removing maniacal

excitement it is worthy of little confidence. But for some forms of melancholy, and especially chronic disease of the digestive organs, with melancholy or neuralgia, it often proves very useful. It is a deobstruent narcotic of no inconsiderable power. In cases of melancholy complicated with disease of the stomach and torpor of the liver, attended by uneasiness, restlessness, watchfulness, and nervous pains, it often affords great relief, and is auxiliary in accomplishing a cure. In pure neuralgia, Conium combined with Iron, Quinine, Nitrate of Silver, or the Arsenical solution of Fowler, often proves a very efficient remedy. It may be advantageously used for a long time, in large doses, without danger. It is only in large doses that it is useful in any case, and particularly as a deobstruent. The minimum dose is ten grains three times a day, the maximum dose, two, three, or four drachms, as frequently repeated. I have rarely found any advantage from doses less than fifteen or twenty grains, repeated three or four times a day, but commonly give from thirty to forty grains as frequently repeated.

With the Carbonate, or Red Oxyd of Iron, it is more frequently prescribed, than in any other way. These two medicines, when combined, qualify each other, and the combination seems to increase the efficacy of both. There is considerable difficulty in procuring a good quality of this extract, it should be made of the expressed juice of the plant, evaporated in a sand bath.

When used in large doses, the extract of Conium produces temporary vertigo, and a heavy, dull pain over the eyes, and across the forehead. If this effect is never produced by the medicine, the dose is either too small or the medicine of a bad quality.

Glandular tumors sometimes disappear quite suddenly under the use of this remedy. A lady came under my care with the deepest melancholy, under the false impression that she had a hole in her stomach, and that all the food she took was impacted in the abdominal cavity. She had had for two years or more cessation of the menses, and an uterine tumor as large as a quart bowl. This tumor gave her little trouble and occasioned no anxiety, the other sufferings and alarm occupied all her thoughts, and made her most unhappy. She took the extract of Conium in combination with the Red Oxyd of Iron, in doses of from thirty to forty grains, three times a day, with Sulphate of Morphine, particularly at night. After some months, the patient got better, the delusion vanished, the health was completely restored, and what was quite surprising to all who had any knowledge of the case, the tumor gradually diminished and finally entirely disappeared, and the

healthy functions of the uterus were restored. There has been no return of either disease since, a period of five or six years. The lady now enjoys uninterrupted health.

CAMPHOR. This medicine has alternately been in favor with, and lost the confidence of, the medical practitioner, for centuries past, and its merits are now very unequally estimated by men of experience in the treatment of insanity. In the large doses in which it has sometimes been used, it has doubtless produced very considerable effect in allaying irritation and procuring sleep. But it is not frequently used in this way, and when it is, its effects are not as certain or as safe as other medicines now more extensively relied upon. The use of Camphor is now principally confined to a combination with other moderate narcotics, to remove slight irritation of the nervous system, and promote sleep. I have used it in various forms, and in large and small doses, without any favorable results. In dismenorrhea connected with insanity, or without it, it is often a useful remedy, in doses of from five to ten grains, and frequently relieves from extreme suffering. The tincture is used externally to the head with temporary relief, and is perhaps more useful than diluted alcohol alone, though generally less efficacious than cold water.

Camphor will probably never again receive the encomiums which it has occasionally had in times past, as a remedy for insanity, but it has a limited usefulness in some cases, and will not be likely to be wholly discarded.

Hyoscyamus. The extract of Hyoscyamus has been extensively used as a remedy in maniacal excitements. It is probably at this day more extensively used, in this country, and in Europe, than any other of the narcotics, and until the preparations of Morphine were extensively introduced, it stood at the head of the list of narcotics, in this and similar diseases.

It is a useful medicine in some cases of moderate excitement, in disturbances of the nervous system, and sleeplessness. In combination with tonics, alteratives and other narcotics, it is useful to allay irritation and produce a quiet and equable state of the system in many forms of mental disease.

In high maniacal excitement, and the extreme suffering of some cases of melancholy, it is only an auxiliary to the more powerful and efficacious remedies that we have before considered. Its virtues have

probably been overrated, but it is worth a trial in many forms of disease that do not require potent remedies. I hardly know of a remedy more likely to induce sleep in simple watchfulness, than a combination of Hyoscyamus, Camphor, and Lupuline, in equal proportions, from two to five grains each for a dose, repeated if necessary. In combination with Nux Vomica and Nitrate of Silver it often proves a valuable remedy.

Nux Vomica, Belladonna, Veratrine. These remedies are useful in some conditions of the nervous system, but, so far as I have known, have not been extensively employed in insanity.

Nux Vomica is useful in palsy, relaxation of the muscular tissues of the stomach, bowels, and bladder, as well as in external muscular weakness. I have used it in cases of melancholy with flatulency and general relaxation of the muscular tone. In my practice it often enters into combination with Nitrate of Silver, in affections of the heart, in epilepsy, neuralgia, and chorea. It is a powerful remedial agent, and may be used in larger doses than is usually prescribed. The first unpleasant symptom arising from its use, is a sense of constriction of the stomach, which is specific, and shows that the medicine is producing some effect.

My own experience of Belladonna is quite limited. It is very apt to affect the vision considerably before it affects the nervous system generally, and this symptom sometimes coincides with the illusions of disease, or creates visual illusions which are likely to disturb the insane. This disagreeable effect is so often produced by it as to operate unfavorably to its extensive use.

VERATRINE is probably not strictly a narcotic, but is a remedy which affects the nervous system in a surprising manner. It will often produce nausea and vomiting before it exhibits any very marked effect as a general remedy. When applied externally in the form of ointment or strong tincture, it relieves neuralgic pains in a surprising manner, usually producing a prickling sensation of the part to which it is applied. When used internally, it has in some cases, produced strangury.

Ammonia, Ether, Lytta, Aromatics, &c. In some low cases of melancholy, and, indeed, in some cases of high excitement, there is coldness of the surface and extremities, a moist skin, paleness or livid-

ity of the skin, particularly of the hands and feet, a weak pulse, and other indications of a languid circulation; in such cases, diffusible stimulants are often indicated. In some cases of recent dementia, in which the patient will stand like a statue, with the face fixed to the floor, moving neither hands, feet or head, nor taking food, nor attending to the calls of nature, without being moved by another; strong stimulants, aromatics, wine and other cordials are indicated, and often produce decidedly good effects. The warm bath, frictions, mustard foot bath, &c., are good auxiliaries in such cases.

The Lytta is also useful for the removal of some local symptoms often connected with insanity. In many cases of unequal circulation of the blood, where the vessels of the brain are too excitable, and those of the extremities too torpid, Lytta, in connection with the use of stimulant baths and the diffusible stimulants, becomes a valuable remedy. Sometimes, even in old cases, it improves the health and gives energy to the mind. In such cases, the brain itself needs stimulation, being torpid and sluggish in its action, all the powers languish for want of vital energy.

Counter Irritation. Blisters, setons and issues, were formerly in great use in insanity. In some cases they doubtless do well, especially in chronic cases, arising from repelled eruptions, and the drying of old ulcers. In recent cases they often produce too much irritation, which, coinciding with disease, often increases excitement. There is often much difficulty in the management of them in severe cases. For the last number of years I have not often prescribed them. One case has been in the Hospital in which the cause is obviously the drying up of ulcers on the legs. The application of stimulant dressings in a few days renewed the discharge, and the insanity disappeared at once. For some years, strict attention has been paid to these ulcers, keeping them always discharging, and the insanity has not recurred.

Tonics. There are many cases of insanity benefitted by the use of Tonics. In acute mania, after the first excitement is over, tonics are often indicated, and not unfrequently may be used with propriety very early in the disease. In many such cases, the great excitement exhausts the vital principle rapidly, and the patient is found enfeebled while considerable excitement exists. In such cases, Quinine, Bark, Aromatics, and often wine, and other stimulants, are beneficial, used at the same time with narcotics.

In cases of melancholy, the use of tonics, in some form, is more frequently indicated than in mania. In melancholy the powers of life often flag, the digestive organs suffer from debility, and tonics are the principal reliance for a cure. Iron, Bark, Nitrate of Silver, Sulphate of Zinc, with vegetable bitters and aromatics, are found useful remedies in this form of insanity. The combination of tonics and narcotics is often successful in melancholy. The extract of Conium, with the red oxyd of Iron and some aromatics, is a useful medicine, as is also the Nitrate of Silver with Nux Vomica, and extract of Hyoscyamus, Capsicum, &c. Quinine, Bark, &c., are more generally indicated in the more acute forms of disease, while Iron, Silver, Zinc and the vegetable bitters do better in the chronic forms.

In many cases of insanity connected with chronic disease, the main object is to restore the health, as soon as this is re-established the mind improves, and not unfrequently this improvement is in strict accordance with improved health. In all cases of insanity the health should be made as perfect as possible, but in chronic cases the principal reliance for recovery of the mental malady is on the restoration of good health. There are many cases of chronic insanity benefitted by narcotics, and some are cured which have long been considered hopeless.

I have often seen chronic insanity, which for a long time had been a source of wretchedness, and which had annoyed all who had come within the circle of its acquaintance, relieved by the use of Morphine, and the person afflicted, made pleasant, healthful, useful and agreeable,—changing the whole character while the medicine was in use, and sometimes affecting a cure. But in many cases the symptoms return, to a greater or less extent, when the remedy is withdrawn. Permanent benefit is often gained in such cases by the combined influence of narcotics and tonics. Narcotics relieve the irritation of the system, and tonics restore the strength. In this form of disease, medical men often fail, for want of perseverance with remedies, which, if continued for a long time, frequently affect cures, when for a few months only, they make very little impression.

BATHS. The warm and cold baths are remedies of more general application than perhaps any others in institutions for the insane. The warm bath is often useful in acute mania, when the patient is continued in it for some time, and when it is renewed frequently on the occurrence of excitement. It is also beneficial to cases of melancholy and

chronic insanity, in which the functions of the skin are performed in an unhealthy manner, or when the surface is cold and dry.

In warm climates baths of various descriptions are probably more beneficial than they are in cold ones. The skin is there more frequently subject to disease and its functions are more likely to be disturbed.

The warm bath should be generally used in all institutions, with all, or nearly all patients, to promote cleanliness and keep up a healthy condition of the surface. The office of the skin is not so well understood, by the public generally, as it should be. Diseases often arise from neglect of baths, and in few diseases are the functions of this important organ more likely to be disturbed than in the various forms of insanity. The perspiration, in some cases, emits an odor quite peculiar and very offensive, which renders cleanliness and ventilation important auxiliaries in their treatment.

Local bathing, as the application of cold water to the head, and warm water or stimulant baths to the feet, is an important adjuvant in the treatment of insanity. Cold applied to the head and warmth to the feet frequently gives relief where the blood inclines to circulate unequally, so that the head is hot and painful, and the feet and other extremities cold. The Nitro-muriatic bath, the mustard bath and salt water bath are all useful local baths. Frequent ablution with warm water, or a solution of Saleratus and water, is often useful where baths are in any way objectionable. Friction with a brush or coarse towel, wet or dry, has very nearly the same effect, but in a more limited degree.

It may be surprising to some that in such a full view of remedies applicable to the treatment of insanity, a list of medicines very frequently prescribed should be entirely overlooked. Of this list are Castor, Valerian, assafætida, and some other mere NERVINES, which from time immemorial have had a conspicuous place in the treatment of nervous diseases, of which insanity is one. I have seen very little benefit from their use. They are disagreeable, often offensive to the stomach, and if they have any effect, the same good can be produced by articles less disgusting and of more certain and permanent effect.

Insanity complicated with Diseases which tend to impede recovery.

PALSY. The most insidious form of disease which is found to accompany insanity is a partial palsy, which is often so trifling as wholly

to escape the observation of friends, and yet they discover that something has changed the appearance of the individual affected with it-He is often irritable, forgetful and undecided; has many schemes quite new and usually visionary; his gait is slightly changed, one limb falters a little at first, and more in the progress of disease, till his walk becomes unsteady as if he were slightly intoxicated; his feelings are easily excited; he weeps and scolds alternately, but is most of the time calm, often pleasant and agreeable; little things disturb his equanimity; slight provocations excite his passions. His mind becomes weakened by degrees, and is childish and trifling. Sometimes he appears better, and the hopes of his friends are renewed; they know not what is the matter, but they see a change in his whole character. If he has been provident and saving, he frequently becomes wasteful and extravagant; he is restless, discontented, and desirous of change; delusions and moral perversions follow. He is sent to a hospital for the insane, with the impression that his disease is trifling and will soon be removed. Fatal mistake,—irremediable mischief is begun in the brain, and the case is hopeless before the friends have apprehended danger. It may be protracted and exhibit some symptoms of amendment, but they are all delusive. Epilepsy, apoplexy, or fatal atrophy, will finally relieve the miserable sufferer by a sudden or lingering death. In such cases the friends are apt to be dissatisfied with the hasty and unfavorable opinion of the experienced medical adviser, and the patient is changed from place to place to obtain a more favorable prognosis, and with a hope that somewhere a cure may be found. I have lost and gained such patients in this way, but never give any encouragement; they will never recover.

Insanity sometimes follows a regular attack of palsy, which has the character of Hemiplegia. Though this form of mental disease affords little hope, it is not so certainly fatal as the one just described. The mind is rarely restored to its former vigor and activity after a paralytic attack, but there is more hope that the patient will regain a comfortable state, and that life will be prolonged. Loss of memory, an excitable state of feeling, and particularly a propensity to weep from slight causes, are almost universally characteristic of the mind after an attack of palsy.

ASTHMA. A large number of cases of insanity, complicated with asthma, have come under my care. Asthmatics are more frequently insane than their proportion in society would admit, if their disease had

no agency, as a cause, in producing insanity. This complication does not necessarily interfere to prevent the recovery of patients affected with this disease; yet I apprehend it is an impediment in the way of a cure. There is often a marked coincidence between the paroxysms of asthma and the periods of excitement in periodical insanity. It is an interesting subject of enquiry, whether the circulation of black blood to the brain, in asthma, predisposes to the excitement of mental disease. Facts connected with it would be exceedingly interesting and instructive.

EPILEPSY. Epilepsy has generally been considered an incurable disease, and has been too often abandoned without an effort for its cure. But epilepsy, when not complicated with palsy, insanity, or incurable injuries of the head, is not always hopeless. There are remedies which make a strong impression upon the disease, and are frequently successful in removing it, when used with efficiency and pursued perseveringly. My experience in this formidable malady has been considerable, and I speak with confidence of the effect of these remedies. Nitrate of Silver, and some of the active preparations of Datura Stramonium, are my principal reliance. I have gone into some detail of their effects in another place. My confidence in the efficacy of these remedies is unabated as my experience is enlarged.

Some circumstances connected with this disease increase its danger and interfere with its cure. When complicated with established habits of intemperance it will rarely be cured, and the effect of that pernicious habit on the brain is such that an abandonment of it will not always leave the patient in circumstances to be benefitted by remedies. The practice of self-pollution often induces epilepsy, and, while it is continued, renders the case hopeless. An abandonment of the habit will often place the patient in a favorable situation for recovery. These two evils connected with insanity render the case entirely hopeless.

Epilepsy complicated with insanity, arising from whatever cause, is a most formidable and dreadful disease. The character of the excitement, in such cases, is the most dangerous and unmanageable, and often so completely impulsive that there is no safety in admitting the unhappy victim of disease into any association with other patients. Even when the mind is nearly demented, and the energies of the physical powers are broken down, they suddenly rally to the most desperate effort, and mischief is done when all the powers seemed to be prostrated.

Epileptics, like the hereditary and homicidal insane, have a peculiar constitutional irritability, easily excited, and difficult to be wholly overcome. Errors in diet, irregularities of every kind, exposures and excesses, have all a great tendency to produce a return of disease when it has been essentially relieved by great attention to regimen and the use of appropriate remedies. With all these complications a majority of the cases of epilepsy can be essentially benefitted by regimen and medicine. In old and incurable cases of epilepsy combined with insanity, remedies have not only lessened the number of the paroxysms, but improved the health and diminished the insanity. A number of cases are now under my care which verify the statement; and so many have for years received improvement, that I feel confident that no future adverse experience can invalidate its truth. I cannot say that I expect this class of patients will be frequently cured, but I have hope that a considerable proportion of them will remain permanently improved after a full trial of remedies, and that individuals who are thus affected may be restored to health and soundness of mind.

One good result, of no inconsiderable magnitude, has arisen from the repeated experiments with remedial agents in these complicated cases of insanity with epilepsy, which is, that by them have been discovered the anti-epileptic powers of certain remedies and systems of regimen, thus greatly prolonging the intervals between the fits, and rendering the paroxysms less severe. If this discovery does not cure these complicated cases, it shows that great hopes may be derived from them in cases arising from certain irritations of the system, and perhaps continued, very considerably, by habit.

Some years ago a most unfortunate man, about forty years of age, was brought to this Hospital. He had had epilepsy very badly for many years, had palsy of one arm, had lost one eye, and was, in his paroxysms of insanity, one of the most desperate and dangerous men that I have ever met with. No hope whatever was entertained of any improvement in the case. In the hope of giving some relief to such a forlorn case of suffering and disease, and making him more comfortable to his associates and those who had the care of him, I prescribed for him the Nitrate of Silver and extract of Stramonium. He pursued these remedies six months, and during that time never had a paroxysm of epilepsy. He became docile and pleasant, pursued light labor, and was trustworthy and harmless. The remedies were withdrawn, and the paroxysms of epilepsy recurred, but with less violence and frequency than before. He left our care some years ago. I have no knowledge of his present situation.

There is now in the Hospital a young woman, aged 27, who has been subject to epilepsy for five years, particularly at the menstrual period, during which she usually had from two to six or eight paroxysms. Soon after she came under my care she had a recurrence of the menses, epilepsy and violent insanity. The paroxysms were at least two a day for three or four days. She has taken the Nitrate of Silver and Stramonium liberally since. At the next menstrual period she was quite insane for a number of days, but had no epilepsy. Since that time she has passed another menstrual period without a recurrence of epilepsy or insanity, which has not happened before for a long period. The trial of remedies has not yet been sufficient to insure a recovery, and I have many fears that the case will prove incurable: but the effect of the medicine to suspend the paroxysms of this complicated case of disease is remarkable and encouraging.

There is a form of epilepsy occurring with those who have had partial palsy, and sometimes with those who have had occasional paroxysms of epilepsy, which is terrific in its aspect and generally fatal in its event, and that very suddenly, which is worthy of consideration. The patient has an epileptic fit, which, in fifteen or twenty minutes, is succeeded by another, and these paroxysms occur at nearly the same regular intervals till death succeeds, in from 20 to 36 hours. The patient rarely, if ever, wakes to consciousness, but in the intervals appears perfectly apoplectic—the vessels of the face are tinged with blood, the countenance livid, and the power of swallowing and muscular motion nearly or quite lost.

I have seen a number of such cases die, and for some years after I became familiar with them I considered them hopeless. quently occur in institutions for the insane. I have recently adopted a course of treatment which has been successful in many cases. stead of blisters, sinapisms and other irritants, I place upon the handle of a spoon a scruple or half a drachm of calomel, and prying open the mouth introduce it as far as practicable, then snapping the other end of the spoon throw it as far as possible down the throat. four or six hours no effect is produced by it, I repeat half the quantity, and so proceed till free catharsis follows. In a very large proportion of the cases the paroxysms have subsided upon the operation of the medicine, and the patient has returned to his accustomed state of health in a few days. I do not remember to have lost but one case of this description for some years past, and have seen a number recover which, under any other prescription that I have seen used, would have certainly proved fatal.

Since I commenced writing this sheet a case of this description has been brought to my care. The epileptic paroxysms were not severe at first, and were not recognised as such by the attending physician. This patient was bled, in the onset of his disease, sixty ounces without relief, but he became pale and bloodless, the pulse, when reaction took place, having the rapidity and irritation that is found to follow excessive homorrhage, the epileptic paroxysms became more distinct and genuine, and occurred once in 15 or 20 minutes. There is a slight degree of consciousness awakened in the interval of his paroxysms, but the patient does not speak, and will probably sink under his disease and the injurious depletion prescribed for him. He is very insane, and it has been difficult to manage or control him. He is now dull, and makes no attempt to move.

Some time since a lady came under my care with puerperal epilepsy. She had had fits once in 15 or 20 minutes for 20 hours, laid apoplectic in the intervals of the paroxysms, and was abandoned by her medical adviser as in a hopeless state. After having over 40 convulsions of this description, I prescribed the calomel as before named, and gave an enema of oil of turpentine and laudanum. The fits left her immediately on the operation of the medicine, but she was wholly blind for a week and quite insane. She gradually recovered and was quite well afterwards.

Very good effects come from this practice in some cases of apoplexy and palsy, where the bowels are constipated and the power of deglutition lost.

I apprehend that in most institutions, and particularly in private practice, there is great want of perseverance in cases of epilepsy. They are considered in the outset as incurable, and remedies which are not followed by immediate improvement of the symptoms are abandoned, and the case is given up as hopeless.

Diseases of the Digestive Organs. Dyspepsia and disease of the liver are often connected with insanity, as a cause or concomitant; in either case it is not a favorable circumstance, and is a frequent impediment to recovery. Hypochondriacal melancholy is the most common form of insanity connected with dyspepsia. If the case is not a bad one, restoration of health often removes the insanity. If the disease of the digestive organs is severe, it frequently terminates in fatal marasmus.

There is a condition of the stomach and bowels connected with

insanity that indicates serious disease, and often proves fatal. The tongue is red and dry, vomiting and diarrhæa are easily excited, the whole intestinal canal partakes of the disease, and a chronic diarrhæa often proves fatal. Such cases do not bear opiates well, and all remedies are often unavailing to promote a cure.

A large proportion of the cases reported as arising from ill health have more or less connection with derangements of the digestive functions. Sometimes the liver is affected with torpor, and sometimes is active in producing a morbid secretion, which, by the ancients, was supposed to be a frequent cause of melancholy. For this they prescribed hellebore with great reputed success. Cases of melancholy relieved by this, or kindred remedies, do not seem to be common in modern times.

## CIRCUMSTANCES FAVORING THE RECOVERY FROM INSANITY.

EARLY Admission. It is conceded by all who have anything to do with the insane, that an early application of remedies and regimen proper in their treatment is favorable to the recovery of the recent insane. For this purpose, after it is settled that the disease is formed and established, they should immediately be sent to a hospital designed for their treatment, that they may not only have the proper remedies administered in season, but that improper appliances, from which many patients suffer while with their friends, may be avoided. In many cases of insanity means, both medical and moral, are adopted which are calculated to prolong and aggravate the symptoms before the patient is sent to a hospital. There is much choice in the institution itself, not only in its architectural arrangements, but in its location as to dryness or dampness, as to exposure, prospect, and outward accommodations.

CLASSIFICATION. Nothing can be more important in such an institution than suitable classification. It is but recently that due attention has been paid to this important consideration. Formerly a large proportion of the inmates of hospitals for the insane were confined in solitary rooms, chained, or in strait waiscoats,—the quiet and the violent crowded indiscriminately together. In Europe, if any separation was made, it had no reference to the character of the case, but to the rank of the individual to society, and this rule is not wholly abandoned at the present time. In some of the institutions, both in this country and abroad, the basis of classification was the amount paid for board and attendance. This objectionable rule has but recently been aban-

doned in some of the most prominent institutions in this country. While in existence it brought together, the violent maniac, the drivelling idiot, and the tranquil monomaniac, the outrageous, profane, and noisy, the convalescent, the timid, and the sensitive. Nothing could be worse than such an association for the curable and those recovering. A better system of classification generally prevails in all the institutions at the present day.

Some writers recommend a strict adherence to the rule of bringing together cases of the same class only. The violent with the violent, the melancholics by themselves. This is a better system than had formerly prevailed, but a more rational and common sense rule is to bring together not only those who will not injure each other, but to classify so that mutual good may be imparted, and so that no one shall associate with those particularly obnoxious to him.

In many of the smaller institutions the limited number of apartments renders perfect classification difficult, while in some of the great ones the apartments are too large and too few. It is desirable to have the wards of such a hospital of moderate size, and to have a considerable number of them.

DIET. The diet of the insane should be simple and substantial. a few cases it may be necessary to prescribe a light diet for a season, but even this is not common. The insane require a considerable quantity of food, and are usually fond of eating. In high maniacal excitement the energies of the system require frequent replenishment in consequence of the exhaustion produced by perpetual activity. rarely injured by food, and very frequently are made more quiet and tranquil by a full meal, a proof, if any be needed, that in mania there is no inflammation of the brain or its membranes. Low diet produces irritation and dissatisfaction, which coincides with the symptoms of disease and increases its intensity. It is generally safe to supply the demands of the patient for food. Many convalescents eat very liberally and gain flesh rapidly. It is always a favorable circumstance to find a recent case, that has been much excited, gaining flesh; we predict from this circumstance alone a favorable termination, even if in other respects there is no particular amendment.

Perhaps there has been no greater improvement in the treatment of the insane than in the matter of diet, the old notions of starvation being everywhere discarded, and a good diet substituted. WARMTH AND VENTILATION are of the first importance in an institution for the insane. The apartments should be of equable temperature at all times, free from too great dryness or dampness of the atmosphere and every nauseous effluvia. The residents in the wards should be placed in such a temperature that they neither think of being cold nor disagreeably warm.

There should be a free circulation of pure air through all the wards of the Hospital, that all disagreeable effluvia be immediately removed from the apartments, and the air for respiration be as free from contamination as the external air. These important objects are most favorably gained by the free admission of air from without, warmed in furnaces so as to admit of a large volume, heated to a moderate temperature. As a means of restoration to the insane these are more important than is generally conceived.

There is now no difference of opinion among those OCCUPATION. who manage the insane relative to the value of employment. sane should never be idle. By employment the maniac expends his excitement in a reasonable and proper way, which he would otherwise exhaust in noise, violence, and mischief. The depressed and melancholic will, by employment, be withdrawn from the theme of his gloomy musings to the consideration of other subjects calculated to disengage his mind from the influence of his delusions, and the wretchedness of his condition. While actively engaged, the monomaniac forgets his vagaries, brings into action powers which have been cast in the shade by intense contemplation of isolated subjects, till the mind, by habits long cherished, is absorbed in hallucinations of its own creation. convalescent, by occupation, strengthens his physical powers, and brings the mind into regular channels of action, till sound and rational views take the place of the ideal creations of a distempered fancy.

All are better for employment: with it the mind is kept active and vigorous; without it, it is constantly becoming more limited in its sphere, till it famishes for want of aliment to sustain it, and it sinks into confirmed and hopeless fatuity. Nothing is so bad for the sane or the insane as inactivity and idleness.

AMUSEMENTS. Recreation and amusements are important in the management of the insane. Acting upon the principle that diversion and change has a tendency to remove from the mind false impressions and abstraction, whatever is innocent in the way of relaxation may do good.

Riding, walking, dancing, music, and various active and sedentary games, are all useful to occupy the time and divert the mind. Active games promote health by the exercise which they give and the pleasure they afford. There can be no difference of opinion as to the utility of riding, walking, and other active exercises, for most of the inmates of hospitals for the insane. They are universally adopted in such establishments, and such abundant testimony in their favor must establish the fact of their usefulness.

Dancing may be objected to by some on account of its supposed immoral tendency, by others as being too exciting for many of the insane, and also as bringing together the sexes, which, in some institutions, they studiously endeavor to avoid. Dancing is an exercise of the right kind, and very harmless in a hospital where every movement is in the hands of the officers, where there is no exposure to vicissitudes of heat and cold, and where it is limited to seasonable hours. There may be some institutions, in the vicinity of large cities, where this amusement might be objectionable, most of the inmates being from a small circle in extent; the intimacies and associations formed at dancing parties might not be desirable abroad. In my own experience I have not met with any difficulty of this kind, and the amusement has been more gratifying to a large class of patients, and more beneficial in its results, than any other mere amusement. Besides those who engage in the exercise, a larger number assemble to enjoy the music, and witness the performance with apparently equal delight.

Music is also one of the great sources of gratification in hospitals for the insane. Like dancing, it is beneficial to those who practice it, and to those who listen to it. It often does good by awakening old associations and long accustomed habits of pleasure, as well as by present gratification, most delightful and tranquilizing to the minds and feelings of the melancholy and desponding. Many highly excited maniacal patients listen attentively to plaintive music, and for the time are made calm and quiet by its influence. It is one of the appliances that rarely injures any one, and often does good to many, even of different and nearly opposite character.

Parties. Social intercourse is extremely useful to the intelligent and convalescent insane. Whatever brings them withing the sphere of customary influences, and makes a residence in a hospital appear like a family or social circle, is calculated to promote their recovery. In this Hospital the Matron's parties, held twice a month, where the patients in considerable numbers meet to spend the afternoon socially and profitably, have been both useful and agreeable. At these parties much clothing and bedding for the patients is made, also articles for sale, by which the library is replenished and made valuable.

There is also much visiting from one gallery to another, and to the apartments of the Matron and family, where an agreeable hour is often spent in cheering and comforting the unhappy, and in increasing the quiet and self-control of the more excited, thus leaving a favorable impression calculated to produce contentment and promote recovery. The more nearly the condition of the insane can approximate to that of the world abroad the better. The hospitals for their care and recovery should be as much like private apartments as possible, when not incompatible with security and protection from external influences. A large number of patients, who spend the day in active and useful employments abroad, spend the evening in the social circle, singing, reading, and playing games in the different apartments of the institution, where they act freely in whatever they do conformable to the lenient government every where adopted.

READING. A library of well selected books is essential to a hospital for the insane. Reading is pursued as an amusement by some, and as a source of instruction and moral and religious improvement by others. Religious reading is enjoyed by many. All have free access to the Bible, and few, if any, are injured by it. It is a source of great comfort and consolation to many, to be able to resort to this foundation of religious hope in the hour of trial and despondency. A blessing so common is not anywhere fully appreciated, but when the twilight of reason begins to dawn upon the mind that has been enveloped in darkness, and overwhelmed with religious gloom and anxious forebodings, then the promises there contained lighten the pathway, excite confidence, and buoy up the soul till consolation and safety is again felt in the hopes of the Gospel, and in that faith that "works by love and purifies the heart."

Many prefer light reading, tales, periodical publications, newspapers, &c. A great number of these are sent to us by our friends, and many are regularly taken.

The amount received by the sale of articles made by our family, has been nearly one hundred and fifty dollars the past year, all of which is

expended to replenish and sustain the library. We acknowledge with gratitude the receipt of valuable donations from the following sources: From the Rev. J. W. Hawkins, 100 temperance tracts; from Rev. T. F. Norris, a large number of books, papers and periodicals, of much value and interest, together with the Olive Branch; from J. S. C. Knowlton, Esq. and J. W. Goodrich, Esq., editors in this town, a liberal supply of papers and periodicals. James M. Barnard, Esq., of Boston, has sent to us rare books and reports from foreign institutions, of uncommon interest and value. He has laid us under great obligations for his continued interest in our welfare. From Judge Thomas, of this town, we received a liberal donation of books, which have afforded much valuable reading; and from E. S. Thomas, Esq. a copy of his "Reminiscences." From the Hon. Edward Everett, we have received the Report of the Metropolitan Commissioners to the British Parliament, a rare and valuable gift. The Hon. Bezaleel Taft remembers us annually, by a donation to our library, and many other kindnesses which we delight to remember. We also aknowledge the receipt of books and papers from Thomas M. Pratt, Esq. of Northampton; papers and other valuable reading from Mr. Thompson, periodical agent, Worcester, and from our valued friend Dr. Batchelder, of Utica.

From the Hon. C. Hudson, D. P. King, J. R. Reading, Mr. Parmenter, Mr. Steward, and Dr. Simons, members of Congress, we have received public documents and valuable papers. From Joseph Adshead, Esq., Manchester, England, we have received interesting foreign papers.

We acknowledge the receipt of the following newspapers from their editors and publishers, to whom, with our thanks, we will make the slight return of a copy of our Annual Report:—The Greenfield Mercury, Boston Recorder, Hampshire Gazette, Olive Branch, Springfield Republican, Springfield Gazette, Old Colony Memorial, Congregational Visitor, Mother's Magazine, Worcester Cataract, Christian Watchman, Social Monitor, Gospel Messenger, Youth's Companion, Christian Witness, Perfectionist, Advocate of Peace, New Bedford Mercury, Fall River Monitor, New York Observer, New Hampshire Patriot, Keene Sentinel.

It would be gratifying to these editors to see with how much avidity the patients from different sections of the State seek for the intelligence from their own neighborhood; how eagerly they glance over the newspaper they have been accustomed to read at home; and what pleasant associations these weekly messengers awaken of home, friends, and by-gone scenes.

Many patients read newspapers when they would read little or nothing else; and as the assistant physician enters the ward with the daily supply of papers, many a hopeless patient comes eagerly forward to receive them; and they pass from patient to patient till they are completely worn out, one reading the stories, another the politics, a third the ship news, and others the poetry, agricultural intelligence, etc. each as his taste may dictate.

Reading produces much occupation, diverts the mind for the time by affording subjects for contemplation, and thus tends directly to promote recovery and prevent fatuity when delusions remain.

Writing is frequently as useful as reading. We are in the habit of indulging those who desire to write letters and other compositions for amusement, as a means of expending excitement. By the compositions of the insane we can often judge more accurately of the state of the mind than by conversation. Many patients write well before they are recovered, and thus deceive their friends, leading them to suppose that they are better than they find them by observation; and some who appear comfortably cannot write at all; others commence a letter well and end it with a scribble. When the mind is not confused by writing, it is often a salutary discipline, and helps to promote recovery.

Labor is by common consent estimated above all other occupations for the insane by the managers of hospitals. All patients who will participate in it are benefitted by it, whether it be the excited, the depressed, the monomaniac, or the demented. By labor, health is improved, excitement is expended, the mind diverted from the delusions of disease, kept bright, and prevented from decay. No individual loses his mind while he is regularly employed, and very few become excited in consequence of occupation.

In cases of mania, with persons accustomed to labor, after the first excitement of disease has subsided, there is a desire for employment, usually in the customary channels. If the man is a farmer he desires to labor on the land; if a mechanic he prefers the workshop. Many females like active employments, others prefer the more sedentary; but nearly all wish to do something, and scarcely any improve if unemployed. Some extremely torpid, not to say demented patients wake up most favorably by the influence of labor, and improve considerably, if they do not recover.

There are many individuals in this Hospital who, previous to entering it, had been in close confinement for years. Many of them commenced labor under the most vigilant supervision, but by degrees gained our confidence, and for the last few years have been permitted to go alone to their employments, where they perform much useful labor. Many of these individuals seem to have no more idea of leaving the establishment than children would the family domicil.

Patient trial, persuasion, and uniform kind management, has brought many insane persons to be useful in the various departments of business. No such person becomes demented, or habitually indulges bitter feelings. All feel an interest in improvements and production, and become identified in interest and feeling with the institution.

Convalescents labor for a season, and then frequently withdraw from it, preferring excursions about the town, and various amusements, to hard work. There are many exceptions to this rule with the working classes. They often prefer regular employment till they are sufficiently recovered to return home and pursue their own business.

In connection with every public hospital for the insane, ample provision should be made for agricultural and horticultural employments, and the more common mechanical trades.

FARM. The farm connected with this Hospital is less than it should be, as more land could be advantageously cultivated.

The quantity of the Products of the Farm and Garden is given in the following statement, with the value as estimated by the Steward.

Hay, 40 tons	, at \$	13 00	per to	on, -		-	-	-	\$520	00
Onions,	130	bushe	ls, at	50	cen	ts,	-	-	65	00
Tomatoes,	30	66	at	50	"	60	-	-	15	00
Green peas,	40	66	at	100	"	-	-	-	40	00
Potatoes,	65	66	at	33	"	-	-	-	21	45
Corn,	140	"	at	70	66	-	-	-	98	00
Soft corn,	15	66	at	35	66	-		-	5	25
Beets,	405	66	at	37	"	-	-	-	149	85
Ruta Baga,	260	66	at	20	"	-	-	-	52	00
Parsnips,	110	"	at	37	"	49	e4	-	40	70
Carrots,	1385	66	at	25	66	40	-	-	346	25
Cabbages,	800		at	5	66	9	-	-	40	00
Broom corn,	459	lbs.	at	$6\overline{2}$		-	-	-	29	83
Broom corn	seed,	30 bu	shels,	at 30	0 "	-	-	40	9	00

Oats and straw, -	-	-		-	-	\$20	00
Winter squashes, 8,000	lbs.,	-	-	-	~	60	00
Pumpkins, 16 loads,		-	-	-	-	16	00
Corn fodder, -	99	-	•	•		15	00
Garden vegetables,	•	-	-	-	-	100	00
Poultry, 460 lbs., at 10	cents,	•		•		46	00
Pasturing 12 cows,	-	-	•	-	-	150	00.
Milk, supposed about 3	6,000 c	quarts, at	4 cents	s, -	-	1440	00
Pork, 6445 lbs., at $3\frac{1}{2}$	cents,	-	-	-	-	354	47
Beef, 6167 lbs., at $4\frac{1}{2}$	66	-	-	•	-	277	51
Pigs sold, -	-	-	-	-	-	81	44
						<b>A</b> 2002	10.15
						\$3992	75

The stock has been fed from the farm and garden. The stock on hand is 4 horses, 5 oxen, 13 cows, and 40 swine.

The farm consists of about 60 acres of land, a large proportion of which is pasturage. There are from 10 to 20 acres of cultivated land, on which this quantity of produce is raised. From our garden we have this year obtained more than 2500 bushels of roots, besides garden vegetables in great profusion, for use through the summer and autumn. These roots are fed to the stock.

In addition to the labor on the farm and in the garden, the laborers have accomplished much in improvements, sawing and piling wood, taking care of stock, and attending to the order and neatness of the grounds and walks.

One patient last winter sawed and split from 75 to 80 cords of wood, at a stipulated price, which was paid him by the Steward.

CABINET SHOP. In the cabinet shop the bedsteads, tables and sinks have been made for the new wings, and a great amount of other labor has been done by patients, under the care of a vigilant and faithful overseer.

Mattress Shop. In this shop, also, a great amount of labor has been done. Nearly all our mattresses are made over annually, and many new ones are also made. At present they are making the mattresses for the new wings, which we hope to be able to accomplish by the time they are ready for occupancy.

In the seamstresses' room nearly \$2,000 worth of clothing and bedding have been made up for the establishment. One female has, in the course of the last year, bound 790 pairs of shoes, made 40 pairs of pantaloons and 32 vests, besides mending and much other work. Other individuals have done nearly or quite as much labor, and one hundred or more are daily employed in some useful manner. From six to ten females have been daily employed in the laundry.

SHOE SHOP. The following statement of the labor and expenses of the shoe shop is given by the overseer.

Amount of work done for	officers.	assista	nts. and o	customers.	\$537,62
For patients, .	•	•	•	•	. 540,38
Stock and shoes on hand,		•	•	•	. 175,00
					\$1,253,00
Expended in stock and to	ols,	•	•	\$657,60	
Stock and shoes on hand	at the	comme	ncement		
of the year, .	•	•	•	155,00	
Wages of overseer,	•	•	•	227,00	
Board of overseer,	•	•	•	100,00	
Binding, fuel, and light,	•		•	60,00	
				-	-\$1,199,60
					\$53.40

\$53,40

No mechanical business is pursued at the Hospital which does not pay for itself, and furnish a moderate balance in favor of the State. This is intended to be small, as the whole establishment is benefitted by low prices of the articles sold rather than by profits cleared.

Religious Exercises. The religious services of the chapel have been conducted, the past year, by our Chaplain, the Rev. George Allen, with his usual fidelity and ability. He has not only officiated twice on each Sabbath, but has attended devotional services each evening in the Johonnot Hall, at which a large proportion of our whole family have usually been present. Reading a portion of Scripture, singing and prayer constitute this exercise.

We feel that the experiment of religious services and instruction at this Hospital has been wholly favorable, and far more extensively useful than was at first anticipated. A larger class have been able to attend than was then expected, and the individuals whom we at first supposed might be excited and injured by these services, have been found to attend with entire tranquillity and composure.

The influence of religious instruction at daily prayers, and weekly in the Chapel, has given our patients favorable impressions of the character and designs of the Hospital, and has increased their confidence in the good intentions of the officers.

In many instances, religious instruction has left influences far above its moral effects on the management of the insane. It has made permanently good impressions upon the character of individuals, amending the heart, improving the life, awakening a sense of religious obligation, and transforming the habits from levity to sobriety, from dissoluteness to the proprieties of rational life.

Religious instruction is here, as elsewhere, designed to strengthen and encourage us in the way of virtue, to regulate and guide the wayward, to awaken the hopes, and afford comfort to the anxious and desponding, to calm and tranquilize the agitated, to do us all present good and prepare us for an heavenly inheritance.

A large portion of the insane are fully capable of appreciating these influences in all things but such as relate to their particular delusions. They know right from wrong, good from evil, and when hurried by passion or impulse into improprieties or mischief, as fully repent and regret the consequences of their errors as other individuals. If this be true, then surely they should come under all the influences that tend to disengage them from error, and guide them in the way of duty. With a motive strongly presented to them, they can control their feelings and govern their conduct. What can more effectually reach the main spring of action in their minds than religious truth, presented in the right manner and with the right spirit?

Conclusion. The past year has been one of unusual labor, anxiety and care. In addition to the management of 260 patients, on an average, buildings have been erected affording more accommodations for the insane than the original Hospital, and though these have been superintended, while being erected, by an able and competent architect, they have increased the labors and responsibility of the officers. The presence of so many individuals at labor in the immediate vicinity of the insane, increases the excitement and diminishes the discipline which it is desirable to maintain in such an institution. With all these embarrassments, now nearly brought to a close, we have had a prosperous

season, and have great reason for gratitude to the Giver of all good that the year has closed so auspiciously.

I would express my thanks to the Board of Trustees for many indulgencies, during the past year, extended to myself personally, in a season of ill health, and for their kindness to my family, no less than for the care and scrutiny with which they have managed the affairs of the Hospital.

To my assistant, Dr. John R. Lee, and to the Steward and Matron, Mr. and Mrs. Hitchcock, I am indebted for every aid which I could have asked at their hands in the management of the Hospital, both while with them and while abroad in pursuit of health. Nothing was left undone which it was in their power to perform.

From the excellent supervisor, Mrs. Sarah Hayward, and all the overseers and officers of the Hospital, in their various departments, I have received every aid which it has been in their power to contribute, and acknowledge with grateful feelings, their deep sympathy in the hour of sickness, no less than their constant willingness to lessen the burden of my duty, and perform their own with cheerfulness and alacrity.

Commending the Hospital and its great interests to the care of the government, and the protection of Heaven, I respectfully submit this Report.

SAMUEL B. WOODWARD.

STATE LUNATIC HOSPITAL, Worcester, Mass. Nov. 30, 1844.

REGISTER OF THE WEATHER, kept at the State Lunatic Hospital, Worcester, Mass., Lat. 42° 15' 49"—Elevation 483 ft.

		REMARKS.			Showronmand of 61 A M. Aingles and	Show commenced at 03 At Mr.; 4 menes show.	Loaronneter, 26.16.			Thermometer 5° below 0 at 5 A. W.	Snow commenced at 31 P. M.	6 inches of snow.		Thermometer 2º below 0 at 6 A M	Rain commenced last evening.			Snow and rain during the day: 2 inches snow					Snow commenced at 6 A. M.: 14 inches			Flow at 12 M.	Thermometer 8° below 0 at 6 Å. M.; 2° be-	Thermometer 6° below at 6 A. M.	Thermometer 6° below at 6 A. M.	Halo around the moon.				
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BAROMETER	2 P. M.	29.72	29.58	29.60	29.62	29.52	22.50	*98 84	29.11	29.31	29.61	- 29.75	29.63	29.48	29.63	29.18	29.24	29.50	29.54	29.43	98.58	29.19	29.26	29.49	29.73	29.66	29.24	29.58	29.58
BAR	Sumrise	29.71	29.58	29.60	29.61	29.53	04.62	99.01	29.09	29.31	29.56	29.65	29.73	29.42	29.64	29.10	29.22	29.43	29 54	29.52	29.33	29.18	29.30	29.38	29 65	29.71	29.36	29.45	29.69
TER.	Sunset.	22	24	e√ ∞ (	926	24 90	96	96	200	16	25	37	32	30	30	34	29	13	36	44	40	41	33	19	28	49	33	34	39
THERMOMETER	2 P. M.	24	24		300	2 6	0 1 1	H 65	24.	17	98	30	36	36	34	40	32	12	38	50	*56	45	29	22	32	20	34	36	46
THER	Sunrise	9	17	33	17	25 6 26 6	520	96	91	0	∞	લ	13	27	13	98	21	<u>}</u>	19	22	33	32	28	16	12	17	28	29	97
FEBRUARY.	Day of the Week.	Thursday	Friday	Saturday	Sunday	Monday	I uesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday
FE	Day of Month.	-	es (	20 z	4,7	<i>ب</i> د	10	- 00	0	10	11	12	13	14	15	91	17.	18	19	02	27	22	83	24	200	36	27	38	68

Range of the Thermometer from 2º below zero to 56º above. Barometer from 28.84 to 29.75. Rain, 1.44 inches. Snow, 12 inches.

REGISTER OF THE WEATHER—Continued.

		KEMAKKS.	Rain in the night.  Show commenced at 3, A. M.; 6 in. snow.  Show in the night, 3 inches.  1½ inches snow.  Rain commenced at 4, P. M. Lightning in Show in the night.  5 inches of snow.  Brin in the evening.	(
the property of the party of th	Inches	of Rain.	- '1. '1. '1. '2. '2. '2. '2. '2. '2. '2. '2. '2. '2	ာ့ မွ
	2	Sunset.	Cloudy do do do do do do Cloudy do Fair do Cloudy Rain Fair Snow Fair Snow Fair Cloudy do Cloudy do Cloudy do do do do do do edo do d	Cloudy Snow 8
A Section of the sect	WEATHER.	2 P. M.	Cloudy do Fair do do Rain Cloudy Fair do Cloudy Rain Fair Cloudy Rain Fair Cloudy Rain Fair Cloudy Rain Fair Cloudy do Cloudy do Cloudy do Cloudy do Cloudy do Cloudy	Fair Snow Fair Fair Fair Fair
		Sunrise.	Fair Foggy Cloudy Snow Fair do do do do Cloudy Rain do Go Rain do Fair do Fair do Fair do Cloudy do Cloudy Go Cloudy do Cloudy Go Cloudy Go Cloudy Go Cloudy Fair do Go Cloudy Fair do Go Cloudy Fair do Go Cloudy Fair do	Fair Fa Snow Sn V. Cloudy Fa
	_•	Sunset.		do do do N. W.
	WIND	e 2 P. M.	N. N	do do do N. W
		t. Sunrise	Single Si	ZZZ
	rer.	. Sunset.	29.18 29.30 29.36 29.36 29.38 29.38 29.37 29.36 20.36	29.32 29.32 29.32 29.32
	BAROMETER	2 P. M.	29	9.26   29.51 9.36   29.30' 9.55   29.76
	BA	Sunrise	29.50 29.52 29.52 29.53 29.54 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55 29.55	29.26 29.36 29.36 29.55
	TER.	Sunset.	44448868448468488488488488488888888888	45.7 22.2 28.2 28.2 28.2 28.2 28.2 28.2 28
	THERMOMETER	2 P. M.	04468444874448844848844888 047100000000000000000000000000000000000	48 25 30
S PASS	THER	Sunrise	4888 41884468888888888888888888888888888	20 20
	MARCH.	Day of the Week.	Friday Saturday Sunday Monday Tuesday Vednesday Thursday Friday Sunday Monday Truesday Truesday Truesday Truesday Truesday Truesday Friday Saturday Saturday Saturday Sunday Monday Truesday Truesday Truesday Wednesday Truesday Wednesday Truesday Truesday Wednesday Truesday Truesday Truesday	Friday Saturday Sunday
	IN	Day of Month.	-86646666666666666666666666666666666666	20 20 30 31

Range of the Thermometer from 6° to 37°. Barometer from 28.79 to 29.90. Rain, 3.80 inches. Snow, 18½ inches.

To de la constitución de la cons	
March	
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Marine .	

													. 86° at 2½.																
DEMADIES	KEMAKKS.	Boromotor 30 94 of QI A M	meter oo.24 at 33, A. m		Aurora borealis.			Lightning in the evening.	0				Thermometer 84° at 1½ P. M.	M.									•						
- ZG		Barro	Dalo		Auro			Ligh	0				Ther	P. M.															
Inches	of Rain.	'	1 '	1	ı	١	1	, ' ,	•	•	•	1	1	1	1	١	1	1	١	.02	1		.22	1	.11	١	t	1	1
F.	Sunset.	Fair	9 <del>-</del>	Cloudy	Fair	Cloudy	do Fair	do	qo	qo	qo	qo	Cloudy	op	op	Fair	qo	qo	Cloudy	Rain	Cloudy	Fair	Rain	Cloudy	Rain	Cloudy	Fair	qo	Cloudy
WEATHER.	2 P. M.	Fair	9-2	op	qo	Cloudy	do Foi;	Cloudy	Fair	qo	qo	do	do	Cloudy	Fair	qo	qo	do	Cloudy	Rain	Fair	, op	Cloudy	Fair	Rain .	Fair	do	qo	do
WEATH	Sunrise.	Fair	ရှင်	qo	qo ,	do	Cloudy	do	Fair	do å	qo	qo	qo	Cloudy	do	qo	Fair	qo	Cloudy	Rain	Cloudy	Kaın	Cloudy	qo	qo	qo	qo	Fair	qo
	Sunset.	N.E.	W. W.	do	M	E E	× 5	N. W.	S. W.	Z.E.	S. E.		S. W.	ᅜ	W.	. W.	N E	qo	Z.E.	qo	ह्यं र	zi l	× .	  - 	N.E.	S. E.	×	. W.	S. W.
WIND.	2 P. M.	E.E.		do	M.		<u>}</u>	. W.	W.	N.E.	w 田	[. W.]	op	ei Ei	×.	I. W.	E.	<u>M</u>	ト 氏 氏	qo	do	<u>·</u>	op	. W.	M .	N 国	M	I. W.	·
	Sunrise	N.N.		7	N.W.	do	$\frac{n}{\geq 2}$	go op	W.S.	N.	闰	S. W.	. W.	M	N.E.	N.W.:	qo	$\frac{1}{8}$	do	ア 田	op	で 対 の	<u>.</u>	M .	$\frac{1}{8}$	N N	W.	Z . W .	op
R.	Sunset. 8	1	5.10	29.28 S	9.64 N	9.95	29.80 30.36	93.9	9.46 N					9.55	9.35	.9.41 N	02.63	8.070	9.55	9.44	9.56	89.63	92.6	9.45 N	9.23 S	9.62	$\frac{8}{3}$ 98.63	9.52 N	9.61
BAROMETER	P. M.	30.14					29.30 2														29.50   2						29.43 2	48	9.65   2
BARC	Sunrise 2	29.99	+																				*						29.67 [ 2
rer.	Sunset.	82.62	3.4	64	84	4 5	48 64 64	50	63	55	59	72	92	54	 80	53	45	49	54	50	63	50	25	62	48	46	54 4	58	29
THERMOMETER.	2 P. M.	43	64	92	54	56	24.0	633	71	74	72	80	\$ 50 70	65	20	29	56	19	χυ : ∞ :	26	£ (	200	250	64	200		20 00	09	22
THER	Sunrise	* 4 25 8		45	77.	25 5	04 v	で 公立 年	33	49	40	45	57	64	45	50		32	<u></u> ۵۵	56	20	22	84,	225	55	300	33	45	92
APRIL.	Day of the Week.	Monday	Wednesday	Thursday	Friday	Saturday	Sunday	Tuesday	Wednesday	Thursday	Friday .	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday
V	Day of Month.	100	ર જ:	4	ひ	91	~ «	0 00	10	11	12	13	14	15	16	17	18	19	20	21	22	253	45	22	58	27	<b>28</b>	83	200

Range of the Thermometer from 18° to 86°. Barometer from 29.23 to 30.24. Rain, .35 of an inch.

		REMARKS.			Thunder storm	Rain commoned at 61 P M	train commence at 05 to m:		High wind				Rain commenced at 8 A. W.	Thunder storm in the night.									White frost.				Thunder storm in the afternoon.		Rain in the night.	)		Rain in the night.	
And the second	Inches	of Rain.			26	99		.18		1			.16	60.		ı		ı	09.	.36	t	.47	8	ŧ	ı	ı	.03	.23	ŧ	ı	t	1	&i 4
	ن.	Sunset.	Fair	op	Rain	do	Fair	Rain	Fair	Cloudy	Fair	Cloudy	do	Fair	Cloudy	do	Fair	Cloudy	Fair	do	do	Rain	Fair	do	qo	do	Cloudy	Rain	Cloudy	Fair	qo	Cloudy	op
	WEATHER.	2 P. M.	Fair	Cloudy	Fair	Cloudy	Fair	op	qo	Cloudy	Fair	do	Rain	Fair	qo	Cloudy	Fair	Rain	Cloudy	Rain	Fair	Rain	Fair	qo	qo	qo	qo	Cloudy	, op	Fair	qo	qo	Cloudy
		Sunrise.	Cloudy	do	Fair	do	op Go	qo	op Op	qo	do	do	Cloudy	Fair	do	Cloudy	Fair	Cloudy	Rain	Cloudy	Fair	Rain	Cloudy	Fair	qo	do	qo	Foggy	Cloudy	do	Fair	op _	Rain
		Sunset.	S. W.		qo	Œ	S. W.	N E	N. W.	-		S. W.		N. W.	do	Š	W.	S. W.	N.E.	N. W.	'()		N. W.			qo	Z. E.	S.W.	qo	· M		SO E	
	WIND.	2 P. M.	S. W.	qo	qo	W.W	S. W	N E	S. W	qo	×	Z. E.	S. W	W.	N. W.	w.	W.	S.W.	N. E.	S.W.	W.	N E	N. W.	Z Ei	S.W.	×.	S.W.	S. E.	S.W.	W.	N. W.	$\mathbf{v}_{i}^{s}$	N 三
		Sunrise	S. W.	op ·	qo	N. W.	W.	S.W.	W.	S.W.	W.	N. W.	S. W.	qo	N. W.	S.W.	W.	S. W.	N.E.	op	W.	S.W.	N. W.	qo	S. W.	qo	N.E.	qo	S. W.	qo	N. W.	×	ري ج
	ER.	Sunset.	29.33	29.25	29.19	29.18	29.29	29.05	29.20	29.20	29.51		29.30	29.16			29.50	29.26	29.48	29.33	29.53	29.26	29.47	29.71	29.72	29.64	29.43	29.27	29.24	.21		29.37	29.16
	BAROMETER	2 P. M.	29.57	29.22	29.24	29.20	29.28	29.28	29.04	29.23	29.42	29.78	29.38	29.00	29.57	29.57	29.57	29.29	29.41	29.31	29.53	29.38	29.34	29.72	29.74	29.69	29.41	29.33	29.21	29.18	29.30	29.42	29.12
200	BAR	Sunrise	29.47	29.26	29.29	29.18	29.22	29.32	28.94	29.36	29.33	29.71	29.64	29.00	29.41	29.56	29.60	29.38	29.20	29.45	29.43	29.55	29.13	29.61	29.72	29.72	29.56	29.41	29.21	29.20	29.24	29.40	29.24
	TER.	Sunset.	69	69	29	54	63	62	58	99	58	99	52	54	09	48	29	59	99	53	09	54	52	5 4	64	74	65	64	72	2	75	64	65
	THERMOMETER	2 P. M.	78	72	73	59	99	74	59	74	63	20	50	49	99	52	74	58	58	20	09	54	9	629	72	ಜ್ಞ	484	09	7.7	92	72	73	99
	THER	Sunrise	50	58	54	54	49	19	52	46	52	46	48	58	40	49	47	51	57	51	43	48	56	35	40	48	52	46	09	09	58	46	96
	MAY.	Day of the Week.	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday
		Day of Month.	1	લ્ય	8	4	70	9	7	∞	6	10	11	?	13	14	15	16	17	18	19	20	21	22	23	24	25	98	27	28	29	0 0 1	31

Range of the Thermometer from 35° to 84. Barometer from 28.94 to 29.78. Rain, 3.67 inches.

51

	REMARKS.	Rain commenced at 8½ P. M.  Dense fog.  Rain in the forenoon. Rain commenced at 10½ P. M.  Frost.  Showers in the morning.  Thunder storm in the afternoon.
Inches	of Rain.	
R.	Sunset.	Fair do
WEATHER	2 P. M.	Fair do
	Sunrise.	Cloudy Fair Cloudy Fair Cloudy Fair do do do do do do Cloudy Fair do Cloudy Fair Rain Cloudy Fair Cloudy Fair Cloudy Fair Cloudy Fair Cloudy Fair Cloudy Fair Cloudy Go do do cloudy Fair Cloudy Fair
Section of the sectio	Sunset.	
WIND.	2 P. M.	N. S.
	Sunrise	N. N
FR.	Sunset.	88988888888888888888888888888888888888
BAROMETER.	2 P. M.	29.33 29.33 29.33 29.34 29.33
BAR	Sunrise	299.39 299.39 299.39 299.39 299.39 299.30 299.30 299.30 299.30 299.30 299.30 299.30 299.30
FER.	Sunset.	65 65 65 65 65 65 65 65 65 65 65 65 65 6
THERMOMETER	2 P. M.	450805508841054551788555 ×
THER	Sunrise	42244224422444 20244224422444 202244224422444 20224224422244 202242222222222
JUNE.	Day of the Week.	Saturday Sunday Monday Tuesday Wednesday Friday Sunday Monday Thursday Sunday Wednesday Friday Sunday Monday Thursday Saturday Saturday Sunday Monday Tuesday Wednesday Tuesday Wednesday Thursday Saturday
	Day of Month.	-00400-00111111111111111111111111111111

REGISTER OF THE WEATHER—Continued.

	KS.	P. M.	
	REMARKS.	Rain in the night.  Rain commenced at 4½ P. M.  Showers in the afternoon.	Rain in the night.
Inches	of Rain.	.070.06	\$ .81  .37 
	Sunset.	Fair do do do do Cloudy Rain Cloudy do	Rain Cloudy do do Cloudy Rain do do do
WEATHER.	2 P. M.	Cloudy Fair do do do do do do do Cloudy Fair do Go do	do Rain Fair Cloudy do Fair Rain Fair do do do do
	Sumrise.	Cloudy Fair Rain Go Go Go Cloudy Fair Go Go Fair Cloudy Go	do Cloudy do do do do do Cloudy do Cloudy do Fair do Cloudy Fair Cloudy Fair Cloudy
	Sunset.		N. N
WIND	2 P. M	N. N. N. S.	V. S. W. S. E. E. S. W. S. E. E. S. W. S. E.
	Sunrise	N. N	S. S
ER.	Sunset.	2992929292929292929292929330 2992929330 2992929330 2992929330 29935330 29935330	29.16 29.20 29.20 29.52 29.33 29.43 29.43 29.55 29.66 29.54 29.66
BAROMETER	2 P. M.	299.39 299.39 299.39 299.34 299.36 299.36 299.39 299.39 299.39 299.39	29.21 29.22 29.25 29.25 29.25 29.37 29.64 29.64 29.64 29.64 29.64
BAF	Sunrise	29.99.99.99.99.99.99.99.99.99.99.99.99.9	29.30 29.32 29.32 29.32 29.47 29.37 29.46 29.46 29.57 29.57
TER.	Sunset.	27.03.45.03.44.03.47.03.47.03.44.03.	73 76 77 61 68 68 71 71 72 72 73
THERMOMETER.	2 P. M.	88 6 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	688 828 828 830 777 773 880 880 880 880 881
THER	Sunrise	7.990 6.00 6.00 6.00 6.00 6.00 6.00 6.00	50 60 60 60 60 60 60 60 60 60 60 60 60 60
JULY.	Day of the Week.	Monday Tuesday Wednesday Thursday Saturday Sunday Monday Tuesday Wednesday Friday Saturday Saturday Saturday Sunday Thursday Friday Sunday Monday Tuesday Tuesday	Friday Saturday Sunday Monday Tuesday Wednesday Thursday Friday Saturday Sunday Monday Tuesday
	Day of Month.	- ex ex 4 to 0 to 8 to 9	0.0 4.8 8.8 8.8 8.8 8.8 8.8 8.8 8.8 8.8 8.8

Range of the Thermometer from 50° to 87°. Barometer from 29.07 to 29.66. Rain, 3.50 inches.

	REMARKS,	Thunder shower in the afternoon. Rain in	9	Rain in the night.	Showers during the day.		Rain in the afternoon.									Fog in the morning.			Slight showers in the afternoon.	Rain in the night.			Thursday chowcas in the night		,		Rain in the afternoon.	Aurora Borealis.		Showers in the afternoon.
Inches	Rain.	72.		1 10	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	•	90.	1	•	• •	•	•	•	,	,	1	•	1	•	.05	•	• 0	22.	36		.07	.04	1	• 8	.32
F.	Sunset.	Fair	qo	Cloudy	Fair	qo	qo	op -	g -	go Go		9-5	qo	Cloudy	Fair	Cloudy	Fair	do	Cloudy	do ,	Fair	Kan	Cloudy	g op	go Go	Rain	Cloudy	Fair	op .	Cloudy
WEATHER.	2 P. M.	Fair	do	qo	qo	olo	Cloudy	Fair	00 -	Cloudy	Fair	-do	ф ф	Cloudy	Fair	do	do	qo	Cloudy	Fair	op -	ر د د	9 6	Cloudy	Fair	Cloudy	do ,	Fair	op -	qo
	Sunrise.	1	Cloudy		Rain	Fair	op _	Foggy	Cloudy	GO Fair	op	g Q	qo	Cloudy	Foggy	Fair	Cloudy	Fair	Cloudy	Rain	Cloudy	Fair	Form	100 100 100	Fair	Cloudy	Foggy	Fair	do ,	qo
D.	M. Sunset.	$\frac{\mathbf{x}}{\mathbf{x}}$	V. N. W.	N. E.	/. N. W.	V. do		. W.	` \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	93   	N Z	90	7. S. W.	do	do		N. W.	V. S. W.	do	N.E.	= ;	. Z Z	1 6	S. W.	三三三	do	qo	V. N. W.	. W.	N. W.
WIND	2 P.	S. W	N N	op ·	N.	Z	S.	Z	S C	S ≥	Z	do	S. K	do	N E	S. W	qo	Z.	S. E	Si Si		i C	2	E	S. E	N.E	op	Z.	<u>``</u>	<b>.</b> 
	Sunrise	S. E	S. ≤	N. K	N E	Z.	· 	<u>`</u> }	N W		A	N. W	qo	S. W	N E	S.	op	N. X	S. W	9	고 고 고	oo u		田	S. W.	N.E.	op	W.		<u>`</u>
ER.	Sunset.	29.57	29.49	29.39	29.15	29.35	29.30	29.40	90.97	29.26	29.33	29.48	29.56	29.66	29.63	29.48	29.33	29.54	29.53	29,43	29.57	04.62	29.05	29.05	29.24	29.19	29.14	29.29	29.43	40.82 l
BAROMETER	2 P. M.	29.36	29.46	29.49	29.13	29.32	29.30	29.36	22.40	29.24	29.32	29.45	29.56	29.66	29.66	29.54	29.34	29.51	29.58	29.44	29.59	90.00	29.05	29.05	29.20	29.19	29.17	29.25	29.34	20.62
BAR	Sunrise	29.36	29.40	29.51	29.20	29.27	29.35	29.30	44.62	29.18	29.30	29.42	29.53	29.61	29.65	29.59	29.39	29.44	29.57	29.47	29.58	23.05 90.18	29.03	29.05	29.13	29.19	29.20	29.18	29.36	29.49
ER.	Sunset.	7.5	_		_					2,5										73	25	00	99	89					200	00
THERMOMETER.	P. M.	80	<del>1</del> 8	85	92	74	73	9/	10	77	73	20.	79	20	88	~~~ %	6	81	76	₩ }	0.5	F 62	25	202	92	72	69	72	25	• ·
THER	Sunrise 2	29	71	99	89	28	200	09	10	73	58	54	53	58	55	96	63	62	79	89	10	27.	288	09	54	26	09	52	40	000
AUGUST.	Day of the Week.	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AL	Day of Month.	-	લ્ય	ري	4		<u>ن</u>	-0	00	10	H	~	13	14	15	91	17	18	19	02.6	7 6	22	24	25	36	27	88	29	e :	77

Range of the Thermometer from 51° to 90°. Barometer from 29.00 to 29.66. Rain, 3.39 inches.

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## REGISTER OF THE WEATHER—Continued.

	REMARKS.	Rain in the night.  Frost. Frost. Frost. Rain commenced at midnight.
Inches	of Rain.	20
R.	Sunset.	Rain Cloudy Fair do
WEATHER.	2 P. M.	Cloudy do
	Sunrise.	Rain do d
WIND.	2 P. M. Sunset.	Column   C
W	Sunrise 2 F	N. N
ER.	Sunset.	29999999999999999999999999999999999999
BAROMETER	2 P. M.	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
BA	Sunrise	29.55 29.55 29.55 29.57
FTER.	Sunset.	00000000000000000000000000000000000000
THERMOMETER	e 2 P. M.	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
THE	Sunrise	24000444000000000000000000000000000000
SEPTEMBER.	Day of the Week.	Sunday Monday Tuesday Wednesday Friday Saturday Sunday Monday Thursday Friday Sunday Monday Thursday Friday Saturday Saturday Saturday Saturday Monday Thursday Thursday Thursday Thursday Thursday Thursday Thursday Thursday Friday Saturday
SEP	Day of Month.	-000400-0001000400100000000000000000000

Range of the Thermometer from 30° to 89°. Barometer from 28.54 to 29.85. Rain, 3.68 inches.

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OF THE WEATHER—Continued.
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and the second point of the second was to exhibit, the property of the second discount of the second	REMARKS			Rain commenced at 3, P. M.						Kain in the night.						High wind and rain during the night.	) )						4 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	nain commuea infough the night.			inches.
halles with a stocker	Inches	Rain.	1 1	1 83 1	1.00	16	17.	1		.07	1	.52	.71		. 5		•	,	•		ı	î		2.1	7 7 07	· · ·	Rain, 7.34 inches.
		Sunset.	Fair do	Rain	Cloudy	do	go Fair	Cloudy	Fair	do	Cloudin	Rain	Cloudy	Fair	Cloudy	Fair	op	Cloudy	Fair	op op	do	op.	00 	Clondy	do	Fair	
Alternative Committee	WEATHER.	2 P. M.	Fair do	Cloudy	rair do	Cloudy	op op	Fair	qo .	Cloudy	Fair	Rain	qo	Fair	Cloudy	Fair	qo	Cloudy	Fair	9 0	qo	qo .	Cloudy	Cloudy		Fair	28.71 to 2
Military Cardio Co. City	M	Sunrise.	Fair do		Kain Fair		Cloudy	do		dy dy	Fair	ခု	Rain		do Rain		Fair		Cloudy	Fogev	Rain	Fair	Cloudy	do Rain	<u>&gt;</u>	do	Barometer from 28.71 to 29.98.
		Sunset.	N. N.		Sign		op op		%; ⊗:	جز الا	qo M	્ર 🖰	do	op ,	op U	Z Z	qo	国	Z V	ــــــ غارية	S. W.		Z H			. W	Barom
	WIND	se 2 P. M.	N.W.	w.	. P	do	- do		$\frac{1}{2}$	N. E.	do do	• •	w i	V. S. W.	do do	iz	$^{\circ}$	SO !	3 F	<u>v</u>	S. W.	р 	<u> </u>	- do	V.	Z	28° to 71°.
		t. Sunrise	N. W	w o	$\nabla \dot{\mathbf{w}}$	W.W.	- P	W)		Z		i v	Ø	W.	do do	i vi	N. W	Ď,	4	do do		vi.	ż	E C	V.	Z	
	TER.	. Sunset.	29.80 29.74		28.53 29.13					29.49						29.30	_	-						29.22		29.48	meter f
000000000000000000000000000000000000000	BAROMETER.	2 P. M	29.81	29.49	28.94	29.35	99.30	29.31	29.18	29.45	29.72	29.17	28.79	29.27	29.69	29.22	29.77	29.98	29.85	23.02	29.66	29.47	29.39	99.23	90.02	29.42	hermo
and the second	BAI	Sunrise	29.76	29.59	29.18 28.95	29.35	29.19 99.49	29.33	29 30	29.38	29.65	23.11	29.03	28.98	29.65	29.09	29.63	29.97	29.89	90.89	29.75	29.54	29.39	29.23	90.00	29.37	of the Thermometer from
	rer.	Sunset.	56	4.0	40 40 70 40	52	4 r	€3	29	χς τς τ		ပ ပ ၈.	54	54	70 40	50 TO 40	42	4.6	51	υ ν. 4 ο	57	61	50	2, - 2, -	4.4	40	Range
A TANKE OF THE PARTY OF	THERMOMETER.	2 P. M.	53	2000	309	57	0 0 0	89 89	711	50,000	59	5 T.	58	59	تن تن <u>د</u>	0 <i>10</i>	45	49	で 4. j	782	09	99	57	\$\$ 40 40 40	34	3	· [2
A COLOR OF THE PERSON OF THE P	THER	Sunrise	36	34	28 46	\$ 4	4 3 6	4 3 3	44	47	20 e	55 564	38	46	40		36	38	96	ئ 4 در	46	50	52	24 20 20	0 88	35	
And the second s	OCTOBER.	Day of the Week.	Tuesday	Thursday	Friday Saturday	Sunday	Monday	Wednesday	Thursday	Friday	Saturday	Sunday	Tuesday	Wednesday	Thursday	Friday	Sunday	Monday	Tuesday	Wednesday	Friday	Saturday	Sunday	Monday	I uesday Wednesday	Thursday	
A STATE OF THE PARTY OF THE PAR	00	Day of Month.	100	ર જ ૧	4 rc	91	<u>-</u> α	ာ	10		3	51	15	91	2	0 6	202	21	828	2, e	33	98	27	82 C	30	35	

Range of the Thermometer from 28° to 71°. Barometer from 28.71 to 29.98. Rain, 7.34 inches.

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	REMARKS.	Thunder shower in the afternoon. Rain in the morning.	Snow squalls in the afternoon and evening.	Snow commenced at 11, A. M. 5 in. snow.
Inches	of Rain.	1.20	1 1 1	.48
Rentestrations	Sunset.	Fair do Cloudy Rain Foggy Cloudy Fair do Go Cloudy Fair do Go Cloudy Fair do Go Cloudy Go Cloudy Go	Cloudy	Snow Fair Cloudy
WEATHER.	2 P. M.	Fair do do Gloudy Fair do do do Gloudy Fair do do do do do do Gloudy Fair Rain Fair Rain Fair do	ရာ ရာ	Snow Cloudy Fair
	Sunrise.	Fair do Go Gloudy Go Cloudy Fair Goody Fair do Go Cloudy Fair Go Cloudy Fair Go	9 9	do Cloudy Fair
	Sunset.	N. N	N N	do V
WIND	2 P. M.	N. S.		S. E. E.
	Sunrise	N. G. W.	9 9	do do do
ER.	Sunset.	29.05 20.05 20.05 20.05 20.05 20.05 20.05 20.05 20.05 20.05 20.05 20	29.48 29.52	29.55 29.50 29.62
BAROMETER.	2 P. M.	29.55 29.39 29.30 29.30 29.30 29.30 29.30 29.30 29.30 29.30 29.30 29.30 29.30 29.30 20.30	29.61 29.46	29.62 29.47 29.63
BA	Sunrise	29.60 29.65 20.65	29.62 29.30	29.65 29.41 29.59
TER.	Sunset.	00000000000000000000000000000000000000	22.50	51 88 84 3
THERMOMETER	2 P. M.	200044488008448084 20004448808848084	8 85 75 85	18 32 41
THE	Sunrise	888488848844881188848888488 88848888488	22 63	14 21 10
NOVEMBER.	Day of the Week.	Friday Saturday Sunday Monday Tuesday Wednesday Friday Saturday Sunday Monday Thursday Friday Saturday Saturday Chursday Thursday Friday Saturday Saturday Saturday Saturday Saturday Saturday Saturday Saturday Sunday Monday Thursday Friday Saturday Saturday Saturday Saturday	Tuesday	Thursday Friday Saturday
VON	Day of Month.	-86470-8001188470-80018844	256	329

Range of the Thermometer from 10° to 58°. Barometer from 28.89 to 29.76. Rain, 3.06 inches. Snow, 5 inches.

30 05

CS STREET, THE CONTROL OF THE CONTRO	of Rein. REMARKS.	29.5			69.			.28	High wind.	)			Snow in the night.	Snow at 23 P. M. About two inches.										: : : : : : : : : : : : : : : : : : :				60  Snow commenced at 1 P. M.; 6 inches.					
	J.						·   <u>&gt;</u>			_	_	\ \ \					_		_														
R.	Sunset.	Cloudy	Fair	Cloudy	Rain	Fair	Cloudy	Rain	Fair	qo	qo	Cloudy	Fair	Snow	Fair	op	op	qo	op	Cloudy	Fair	Cloudy	Rain	op	Fair	qo	Cloudy	Snow	Fair	qo	op	op	
WEATHER.	2 P. M.	Snow	Fair	Cloudy	Rain	Fair	Cloudy	Rain ,	Fair	qo	qo	Cloudy	Fair	Cloudy	Fair	op	qo	qo	qo	Cloudy	Fair	Cloudy	Foggy	do	Fair	op	qo	Snow	Cloudy	Fair	Cloudy	Fair	F 000
	Sunrise.	Rain	Fair	op_	Rain	Foggy	Cloudy	Foggy	Fair	qo	do	Cloudy	, op	do	Snow	Cloudy	Fair ,	qo	qo	qo			-			qo	Cloudy	Rain	Snow	Fair	Cloudy	Fair	
A OF CHANGE OF THE PARTY OF THE	Sunset.	N. W.	7	N.E.	qo	qo	op	S. W.	×.	S. ⊗	N. W.	N.E.	W.	S. W.	qo	W.	N. W	qo	qo	S. W.	N. W.	S.W.	Z E	op	N. W.	S.W.	qo	Z E	N. W.	S.W.	qo	N. W.	•
WIND.	2 P. M.	N. W.	-	N E	qo	qo	qo	S. W.	N. W.	S. W.	N. W.	N.E.	N. W.	S. W.	qo	W.	S. W.	N. W.	op	S. W.	N. W.	S. W.	N.E.	qo	N. W.	S. W.	op	N.E.	N. W.	W.	S. E.	W.	
	Sunrise	W	N. W.	Ď	N E	qo	qo	S. W.	N. W.	W.	W.	N. W.	do	W.	W.	S. W.	W.	N. W.	qo	S. W.	N. W.	op	S. W.	N.E.	N Z	S. W.	qo	N. W.	qo	qo	N.E.		7
ER.	Sunset.	1	29.72		29.29	29.65	29.77		29.46	29.60	29.54	29.57	29.34	29.29	29.03	29.04	29.03		29.33			29.41	29.13	28.41	29.26	29.55	29.24	29.16	29.13	29.48	29.08	29.44	
BAROMETER	2 P. M.	29.39	29.79	29.92	29.29	29.60	29.77	29.06	29.38	29.64	29.47	29.64	29.35	29.29	29.03	29.03	29.04	29.03	29.24	29.36	29.48	29.43	29.18	28.49	29.14	29.55	29.24	29.16	29.06	29.46	29.13	29.42	
BAR	Sunrise	!		-16				29.45																						29.41	29.35	29.29	
ER.	Sunset.	<u> </u>			34			3						_																27	38	30	11.
THERMOMETER	P. M.	34	46	30	34	3	35	52	24	32	41	18	31	33	37	35	33	22	19	31	23	27	32	41	34	£	52	31	20	97	30	38	
THER	Sunrise 2	4.1	22	24	32	37	33	35	27	91	23	15	23	14	53	- 38	24	16	16	18	17	∞ 	32	 88 	24	96	38	40	91	6	18	33	t
DECEMBER.	Day of the Week.	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday 7	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday	
DEC	Day of Month.	-	91	က	4	70	9	7	φ	6	10	H	12	13	14	15	16	17	8	19	0%	21	<b>3</b> 5	લ્ટ	24 4	25	50°	27	88	29	ස	31	

Range of the Thermometer from 8° to 54°. Barometer from 28.41 to 29.94. Rain, 2.56 inches. Snow, 8 inches.

1 3° buf left.	TOTAL.			Fair days, 230 Cloudy days, 136 DAYS ON WHICH Rain fell, 30 Halos of the moon were seen, 3 Auroræ Boreales, - 2	Inches of rain, 37.85 Inches of snow, 57	Days on which N. wind prevailed, 0  " " N. W. " " 113  " W. " " 29  " S. W. " " 102  " S. W. " " 23  " E. " E. " 23  " N. E. " 23
	Dec.	inches. 29.94 28.41 29.175	42 0 0	16 15 15 15 16 17 18 18 18 18 18 18 18 18 18 18 18 18 18	2.56 8 1	0000000
il.	Nov.	inches. 29.76 28.89 29.325	58° 10° 34°	11 11 0 0 0	3.06	00240809
ntinue	Oct.	inches. 29.98 28.71 29.345	71° 28° 49°.5	15 16 11 0 0	7.34	00000000
-Co	Sept.	inches. 29.35 29.54 29.195	89° 30° 59°.5	21 9 0 0	3.68	021000004
WEATHER—Continued.	Aug.	29.66 29.00 29.33	90° 51° 70°.5	22 9 0 0	3.39	07400814
	July.	29.66 29.07 29.365	87° 50° 68°.5	21 10 11 0 0 0	3.50	00000000
THE W	June.	29.78 29.11 29.445	88° 44° 66°	48 0 0 0	1.92	04470000
T T	May.	inches. 29.78 28.94 29.36	84° 35° 59°.5	12 12 14 0 0	3.67	06401606
REGISTER OF	April.	inches. 30.24 29.23 29.735	86° 18° 52°	81 86 4001	0.35	10 10 10 10 8
ISTI	March.	inches. 29.90 28.79 29.345	570 60 310.5	13 18 0 0	3.80 18.5	048908000
REG	Feb'y.	inches. 29.75 28.84 29.295	28° 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	00 80-0	1.44	000000000000000000000000000000000000000
	Jan'y.	inches. 29.74 28.35 29.045	40° 8° be- low. 16°	ಟ್ ಟ್ ಸಂ೮೦	3.14 13.5	200000000000000000000000000000000000000
Jen 1/2 1		Greatest height of the Barometer,  Least height of the Barometer,  Mean between the greatest and least heights of the Barometer,	Greatest height of the Thermometer, - Least height of the Thermometer, - Mean between the greatest and least heights of the Thermometer, -	Fair days, Cloudy days, Shout fell, Show fell, Halos of the moon were seen, Auroræ Boreales, Show fell, Character fell, Charac	Inches of rain,	Days on which N. wind prevailed,  """" N.W. """"  """" S. W. """"  """" S. W. """  """" S. E. """  """ S. E. """  """ S. E. ""  """ S. E. ""